

PROBATION DECLARATION APPROVAL FORM BY DDO AND GSWS EMPLOYEE

1. Name of the District :
2. Name of the Mandal :
3. Name of the Sachivalayam :
4. Department :
5. Designation :
6. Name of the Employee :
7. CFMS ID :
8. Date of Joining :
9. Mobile No :
10. EMAIL ID :
11. Is there any Break in the Service period
(Leaves availed other than Casual leaves,
Optional Holidays and Suspension)?
(YES/NO) :
12. If YES Nature of Break
(Maternity Leave/Medical Leave) :
13. If YES duration of break :
14. Date of completion of 2 years of continuous
service (excluding Break if availed) :
15. Whether All prescribed Departmental Test
Papers Passed?(YES/NO) :
16. If YES Paper Name & Code :
17. If YES Hall Ticket Number :
18. Whether any Disciplinary Cases pending
(YES/NO) :
19. Whether Service Register Opened or Not
(YES/NO) :
20. Antecedents Verification completed or Not
(YES/NO) :
21. If yes, Remarks given by Police department
during Antecedents verification.
(Nothing Adverse/ Adverse)
and furnish CA number :
22. Whether Eligible for Declaration of Probation
(YES/NO) :
23. Remarks :

I hereby declare that the information furnished as above are correct and I shall liable for punishment if any wrong information submitted

Signature of the Employee

The above particulars are verified with reference to the original records and Service registers of the individual.

Signature of the DDO and Seal