

UNDERTAKING FOR AVAILING EXTRAORDINARY LEAVE

Name of the Employee :

Employee ID No. :

Position Title :

Ministry/Department/Agency:

I, hereby do affirm and declare that the information/reasons provided in my application for extraordinary leave dated.....is true to the best of my knowledge and nothing material has been concealed there from. In the event the reasons furnished in my application are found incorrect, I shall be liable for administrative/legal actions as per the Civil Service Rules & Regulations and the law of the Land. I also undertake to provide any additional information that may be required in due course of time.

Place:

Date:

(Affix Legal Stamp)
Signature of the Employee.

Witnesses:

1.

2.