

OPTION FORM

I do hereby exercise my option for fixation of my pay in the promotional/ up gradation in Pay Level...... of Pay Matrix as recommended by 7th CPC & approved by Govt. of India with effect from;

a)	, , the date of my promotion / Up-gradation
	OR
b)	, , the date of my next increment.

Further I hereby undertake that any excess payment that may be found to have been made as a result of incorrect fixation of pay or any excess payment detected in the light of discrepancies noticed subsequently will be refunded by me to the Institute against future payments due to me.

Signature	
Name	
Designation	
Dept / Sec	

Date:

Place: