

FORM 26

[See Rule 8 (3-A)]

UNDERTAKING

I, _____, who have worked in _____ (Name of the Organization, [Organizations as included in the Second Schedule to the Right to Information Act, 2005]), in the post of _____ for the period from _____ to _____ hereby solemnly declare that, save with prior approval of the Competent Authority, I shall not publish in any manner, while in service or after my retirement from service, any information which I have obtained by virtue of my working in the aforesaid Organization and which is likely to prejudicially affect the (i) sovereignty and integrity of India, (ii) the security, (iii) strategic, (iv) scientific, or (v) economic interests of the State, or (vi) in relation with a foreign State, or (vii) which would lead to incitement of an offence. This declaration is notwithstanding my responsibilities and liability, in terms of the relevant Conduct Rules, Pension Rules, Laws dealing with offences relating to official secrets or national security and the Intelligence Organizations (Restriction of Right) Act, as the case may be. I further agree that in the event of any failure of the above undertaking by me, the decision of the Government as to whether it was likely to prejudicially affect any of the seven aspects stated above shall be binding on me.

2. I am aware that the pension which may be granted to me after retirement, in terms of the relevant Pension Rules, can be withheld or withdrawn, in full or part, for any failure of this undertaking given.

Signature of the Government Servant

Place _____

Dated _____

SPECIMEN LETTER OF UNDERTAKING BY THE PENSIONER

Date _____

To
The Branch Manager

_____ (Bank)
_____ (Branch & address)

Dear Sir,

Payment of pension under A/C
No. _____ through your Bank.

In consideration of your having, at my request, agreed to make payment of pension due to me every month by credit to my account with you. I the undersigned agree and undertake to refund or make good any amount to which I am not entitled or any amount which may be credited to my account in excess of the amount to which I am or would be entitled. I further hereby undertake and agree to bind myself and my heirs, successor, executors and administrators to indemnify the bank from and against any loss, suffered or incurred by the bank in so crediting my pension to my account under the scheme and to forthwith pay the same to the bank and also irrevocably authorise the bank to recover the amount due by debit to my said account or any other account/ deposits belonging to me in the possession of the bank.

Yours faithfully,

Signature:

Name:

Address:

Witnesses:

(1) Signature:

(2) Signature:

Name:

Address:

Date:

Name:

Address:

Date:

OPTION FOR MEMBERSHIP OF DELHI GOVERNMENT
RETIRED EMPLOYEES HEALTH SCHEME

I hereby opt for the membership of Delhi Government Retired Employees Health Scheme w.e.f. _____ for availing the medical facilities for which I shall deposit subscription in lump sum (equal to 10 years of subscription) for the life time membership.

(_____)

Designation

**Written statement for counting of period of service under rule
59(1) (a), if any**

**Statement by the Govt. Servant for counting of period of Service under Rule 59(1)(a), if
any**