

FORM -R1

New **OR Change Request** (Please tick as appropriate)

In case of change request please tick the box in the left margin where change / correction is required and provide details in the corresponding row.

Case Worker
Superintendent

KHAJANE
Treasury Department
Certification Form

D. D. O
Messenger

(To be furnished to Treasury Officer for Registration of Government Servant in Khajane II)

1. Name of Government Servant (in capital letters): Sri/Ms/Dr
2. Identity Details of Government Servant
- 2(a) Gender: M / F
- 2(b) KGID Number:
- 2(c) Aadhaar Number (12 digits):
3. Department :
4. Cadre :
5. Present Post held(Attach copy of Posting Order or Form R-2) :
6. Field Office Name :
7. Field Office address :
8. Mobile Number(10 digits) :
9. Email ID: _____
10. Date of Joining into Government Service
11. Specimen Signatures:



Specimen Signature 1	Specimen Signature 2	Specimen Signature 3

Declaration: I hereby declare that the particulars furnished above are true and correct and I undertake to inform you of any changes therein immediately. In case any information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.

Date: ___/___/_____

Signature of the Government Servant

For The Use of Drawing & Disbursing Officer Only

Declaration: I have verified the above information to be correct.

Name of Drawing Officer:

Designation:

Date: ____/____/____

Signature

Form - R 2

KHAJANE II Department of Treasuries

Certificate of Posting

(To be furnished (in original) to Treasury Officer for registration in Khajane II in case the government servant is unable to provide copy of Government Order for posting in the present post)

This is to certify that Sri/Smt/Dr _____

(full name in capital letters) is presently working as _____

(name of post in capital letters) in the office of _____

(name of field office in capital letters) from ____/____/____ (date of joining in

the present post) vide G.O. No

(Government Order No. for posting the government servant to the present post).

Signature (with date) of the Reporting Officer

Office Seal

Name:

Designation: