



राष्ट्रीय व्यावसायिक स्वास्थ्य संस्थान

NATIONAL INSTITUTE OF OCCUPATIONAL HEALTH

(WHO Collaborative Centre for Occupational Health & IPCS Participating Institute)

(Indian Council of Medical Research)

Meghani Nagar, Ahmedabad-380 016, India

NOTIFICATION

No. 1/7th CPC(Pensioners)/2017-18/ 5163

11 Jan 2018

As per ICMR Letter No. 16/71/2016-Adm.II dated 07th Sept 2017, preparatory arrangement for revision of Pension wef 01 Jan 2016 is required to be done at all Institute Level. Pension of all retired employees of NIOH-Ahmedabad needs to be refixed as on 01 Jan 2016.

For Pay Fixation, the Option Form and Undertaking is required to be taken from all retired employees of the Institute and at Centre Level. The Option Form and Undertaking is attached with this Notification for uploading on NIOH Website.

(MR Shah)
Adm Officer
For Director

FORM OF OPTION

[See rule 6(2)]

*1. I, _____ hereby elect the revised pay structure with effect from 1st January, 2016.

*2. I, _____ hereby elect to continue on Pay Band and Grade Pay of my substantive/officiating post mentioned below until :

* the date of my next increment / the date of my subsequent increment raising my pay to Rs. _____ / I vacate or cease to draw pay in the existing pay structure / the date of my promotion/upgradation to the post of _____.

Existing Pay Band and Grade Pay _____

Signature _____

Name _____

Designation _____

Office in which employed _____

* To be scored out, if not applicable.

UNDERTAKING

I hereby undertake that in the event of my pay having been fixed in a manner contrary to the provisions contained in the Rules, as detected subsequently, any excess payment so made shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise.

Signature _____

Name _____

Designation _____

Date :

Place :