Accompaniment to Government Resolution

Higher and Technical Education Department No. Resolution No. Misc-2018/C.R. 56/18/ UNI – 1, dated 08th March, 2019.

PROFORMA FOR FIXATION OF PAY

Name of the College/Institution : _____

Name of the teacher : Shri./Smt. : _____

Sr. No.	Description	Relevant Information
1.	Designation of the post in which pay is to be fixed as on	
	January 01, 2016 or on	
	(latter date)	
2.	Status (Substantive/Officiating)	
3.	Pre-revised Pay Band and Academic Grade Pay or Scale	
4.	Existing Emoluments as on 01.01.2016 (as per pre- revised scale)	
	a. Basic Pay (pay in applicable Pay Band plus applicable Academic Grade Pay or Basic Pay)	
	b. Dearness Allowance	
	c. Existing emoluments (a+b)	
5.	Basic Pay (Pay in applicable Pay Band plus applicable Academic Grade Pay or Basic Pay) in the pre-reserved structure as on January 1] 2016	
6.	Applicable Level in Pay Matrix corresponding to Pay Band and Grade Pay or Scale shown at Sr. No. 3	
7.	Amount arrived at by multiplying basic pay as at Sr. No. 05 by 2.57	
8.	Applicable Cell in the Level either equal to or just above the Amount at Sr. No. 7	
9.	Revised Basic Pay (as per Sr. No. 8)	
10.	Stepped up pay with reference to the revised pay of Junior, if applicable Name and Pay of the Junior also to be indicated distinctly.	
11.	Revised Pay with reference to the Substantive Pay in case where the pay fixed in the officiating post is lower than the pay fixed in the substantive post, if applicable	
12.	Personal Pay, if any	
13.	Date of next increment and pay after grant of increment.	

Date of Increment

Pay after increment in applicable Level of Pay Matrix

14. Any other relevant information :

Signature & Designation of Head of Institution

Place :

Date :

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Appendix IV

Form of Option

1. I,	substa	ntive/officiating holder		
of the post	in the scale of Rs	, AGP		
, in the College/Institution _		hereby :		
*(i) elect the revised scale of the post with effect from 1 st January, 2016.				
*(ii) elect to continue on the existing scale of pay of my substantive/officiating post				
mentioned below until :				
* the date of my increment				
* the date of my subsequent increment				
* raising my pay to Rs				
* I vacate or cease to draw pay in that scale				
2. The option hereby exercised is final and will not be modified at any subsequent date.				
Date :	Signature :			

Place :

Signature : Signed before me Signature (Principal of College)

(Received the above declaration)

Date :

Signature (Head of the Institution)

* To be scored out, if not applicable.

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UNDERTAKING

(As per Ministry of Finance (Department of Expenditure) order O. M. No. 1-5/2016-IC dated 29th July, 2016)

I hereby undertake that any excess payment that may be found to have been made on account of incorrect fixation of pay in the revised Pay Level or grant of inappropriate Pay Level and Pay Cells or any other excess payment made to me shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise.

Date : Place : Signature : Name : Designation : College/Institution :