| NAME OF DIVISION | SECTION | |
|------------------|---------|--|
| | | |

PROFORMA FOR JUSTIFICATION OF REQUIREMENT OF CONTRACTUAL MANPOWER

| Details of Work/services done by Section | | Details of Staff | | | | | Justification for | Indication the | |
|--|--|------------------|-------------|-------------|----------|--|--|-----------------------------------|-----------------------------|
| | | Regular | | Contractual | | | Continuation beyond 31 st | name/designation of staff retired | |
| | | Name of Staff | Designation | Name | Category | Date of Deployment at division/section | Details of work done during last six months | March 2017 | during 2014, 2015 & 2016 |
| S. | | | | | | | | | |
| No. | | | | | | | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| 4. | | | | | | | | | |

Signature of HOD

Note: (i) Filled up proforma should be legible.

(ii) If required, separate sheet may be used.