PROFORMA FOR OBTAINING SANCTION FOR UNDERTAKING

LOCAL JOURNEY ON OVERTIME

TO BE FILLED SEPARATELY FOR EACH STAFF MEMBER IN ADVANCE

l.	Name of Officer recommending overtime		
2.	Name of the staff member with designation deputed		
3.	Date and time		
4.	Nature of urgent work proposed to be completed The above staff member is required to attend office on the date and time noted above He/She may be permitted to perform the overtime duty.		
	Certified that the above work is of urgent a working day. Conveyance chargesby approved.	for undertaking journey from	
	Signature of the staff member in token of acceptance to perform overtime work.		
	Name Designation	Signature	
	Member Secretary may kindly approve.		
		(Signature) Name & Designation of Officer	
	MEMBER SECRETARY	Name & Designation of Officer	
	PERFORMANCE REPORT		
	Certified that the work on overtime forhours, (excluding one free hour after office hours on working days and half hour (lunch break) on holiday as per rule) has been completed satisfactorily. Conveyance charges as proposed above may be sanctioned.		
		(Signature)	
		Name & designation of Officer	
	MEMBER SECRETARY		