

**KURUKSHETRA UNIVERSITY, KURUKSHETRA**  
(Established by the State Legislature Act XII of 1956)  
("A++" Grade, NAAC Accredited)

No.Pen/2024/ \_\_\_\_\_  
Dated: \_\_\_\_\_

**NOTIFICATION**

It is notified hereby that as per orders of the Hon'ble Vice-Chancellor, the University in terms of State Govt. O.M. No. 13/19-2008-1HR-I dated 17-09-2024 has decided to extend the LTC for the Block Year 2020-2023 upto 31-12-2024 in respect of only those pensioners who could not avail LTC during the enforcement of Block Year 2020-2023. Therefore, all the left out eligible pensioners who could not avail LTC during the Block Year 2020-2023 are requested to submit their LTC form for the Block Year 2020-2023 latest by 31-12-2024 in Pension Cell, in a prescribed format attached herewith and also available on University website [kuk.ac.in](http://kuk.ac.in).

  
Assistant Registrar,  
(Accounts Branch)

Ends.No.Pen/2024/ 1420-23 Dated: 19/12/24

Copy of the above is forwarded to the following for information and necessary action:-

1. President, K.U. Sr. Citizens Forum, Kurukshetra.
2. President, Kurukshetra University Pensioners' Welfare Association (Regd.), Kurukshetra.
3. Director, I.T. Cell, K.U. Kurukshetra for uploading of the LTC proforma on University website.
4. P.S. to Finance Officer, K.U. Kurukshetra.

  
Assistant Registrar,  
(Accounts Branch)

# **KURUKSHETRA UNIVERSITY, KURUKSHETRA**

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## **APPLICATION FOR AVAILING OF LEAVE TRAVEL CONCESSION**

(Extended upto 31-12-2024 for those pensioners who could not avail LTC during Block Year 2020-23)

1. Full name & Designation of the Pensioner : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Dept./Branch in which worked at last : \_\_\_\_\_
4. Date of Birth : \_\_\_\_\_
5. Date of joining in the University service : \_\_\_\_\_
6. Date of Retirement : \_\_\_\_\_
7. Pension : Basic Pension + D.R. = Total  
\_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_
8. Whether both husband and wife is in service/Pensioner **Yes/No**  
(If yes please submit the following information)  
Name of the wife/husband : \_\_\_\_\_  
Post held : \_\_\_\_\_  
Department where working/worked : \_\_\_\_\_  
Please indicate who will avail the LTC : \_\_\_\_\_
9. Block year for which LTC is to be availed of : \_\_\_\_\_
10. Whether LTC availed previously in Block year  
2020-2023 before issue of Instructions : \_\_\_\_\_
11. Any other information : \_\_\_\_\_

Certified that the information given above is correct to the best of my knowledge and belief and nothing has been concealed therein. I further clarify that I am not re-employed after retirement in any Organization/Institute of Govt. Autonomous body or private or Company

### **Pay Order**

LTC paid to the pensioner  
Rs .....  
(in words Rs.....  
.....)

For the Block Year **2020-2023**

(Signature of the Pensioner)

PPO No. \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_

**Astt. Supdt. A.R. (A/c)**

## **UNDERTAKING**

[Under Para 1 (iii) of instruction in memo no: 13/19/2008-2SII dated 19<sup>th</sup> July, 2012].  
It is hereby undertaken that:

- (a) I am eligible to draw the benefit promised by the scheme put in place vide memo: 13/19/2008-2SII dated 29<sup>th</sup> October, 2009.
- (b) My entitled family members, including the spouse, who is pensioner or in the employment of Government of Haryana, and who is also eligible to draw the benefit promised by the scheme put in place vide memo No: 13/19/2008-2SII dated 19<sup>th</sup> July, 2012 shall not avail the benefit promised by the scheme put in place vide memo No: 13/19/2008-2SII dated 19<sup>th</sup> July, 2012 separately for the current block of four years regulating the LTC.

Or

My entitled family members, including the spouse, who is pensioner or in the employment under the Central Government or any other State Government or under any other organization/ institution/ body, etc. wholly or substantially owned or controlled by the Central Government or any State Government shall not avail of the facilities of LTC from their employer in whatever form it is extended to him/her by their such respective employer.

Signature of Pensioner	:	_____
Name of the concerned pensioner	:	_____
Designation	:	_____
PPO No.	:	_____
Signature of spouse	:	_____
Name of spouse	:	_____

## **UNDERTAKING**

[under para 1(iii) of instruction in memo no: 13/19/2008-2SII dated 19<sup>th</sup> July, 2012].  
It is hereby undertaken that:

- 1. I am eligible to draw the benefit promised by the scheme put in place vide memo: 13/19/2008-2SII dated 19<sup>th</sup> July, 2012.
- 2. None amongst my entitled family members, including the spouse, is either pensioner or in service of Government of Haryana or in service under the Central Government or any other State Government or under any other organization/institution/body, etc., wholly or substantially owned or controlled by the Central Government or any State Government.

Signature of Pensioner	:	_____
Name of the concerned pensioner	:	_____
Designation	:	_____
PPO No.	:	_____

**Countersigned.**

Signature with stamp of office.