

DEPARTMENTAL PERMISSION CERTIFICATE (DPC)

To be submitted by the candidates who are in Govt./Semi Govt. Service with the APPLICATION FORM duly completed failing which the application shall be liable to rejection.

1. **The following particulars should be filled in by the candidate:-**

Full Name of Candidate:	
Father's/ Husband's Name:	
Post Held (Presently)	
Office/ Department	
Post Applied for:	

Signature of the Candidate/ Applicant

2. **This portion should be filled in completely by the concerned Department/ Office:**

- (a) He/ She has been employed in this Department/ Office as _____
_____ Since _____
- (b) He/ She holds this post in Permanent / Temporary, Adhoc capacity or Contract basis: _____
- (c) The candidate's domicile as accepted by this Department/ Office and recorded in official record is _____ District.
- (d) There is nothing on record of this Department which may render him ineligible for the post and that his/her record of service is satisfactory and no departmental proceedings are pending against the candidate.

Signature and Official Stamp of
Head of Department / Appointing Authority

Note:

- The signing authority of the above permission should please ensure that all the blank spaces meant to be filled in by the Department are accurately filled in.
- If a departmental candidate/employee is selected / nominated by the Competent Authority, the parent Department of that candidate shall be bound to relieve him/her to enable him/her to join the post for which he/she has been recommended.