## **ANNEXURE**

## FORM FOR EXERCISING OPTION UNDER THE TELANGANA REVISED SCALES OF PAY RULES, 2020

(*) I,	holding the post of	)f
in t	ne scale of Rs in the office of	of
	do hereby elect to come under the Revised Pa	У
Scales, 2020 with effect	from 1 <sup>st</sup> July, 2018 / date of my next increment o	n
/ 01.07.2	018 with / without increment in the existing scale.**	
(*) I,	holding the post o	of
	the scale of Rs in the office of th	
c	o hereby elect to continue in the existing scale of pay.	
The option hereby exerc	ised is final and will not be modified at any subsequer	١t
date.		
Date:	Signature: Name:	
Station:	Designation: Office in which employed.	
	Signed before me;	
	Signature of Head of Office (with date (In case of Non-Gazetted Office)	•
<b>.</b>	Signature of Another Gazetted Officer (In case of Gazetted Officer	r)
•	oe given in respect of substantive and officiating posts. not applicable. (**) strike whichever is not applicable.	
Received the above decla	ration:	
Date:	Signature: Pay and Accounts Officer/Head of Office	