

**Acknowledgement of Application for compassionate appointment**

To,  
Shri/Smt./Kum.....  
.....

The application dated..... of Shri/Smt./Kum..... for compassionate appointment against demise/retirement on medical ground of Shri..... has been received by this office and found correct by this office in all respect. The application will be forwarded to Circle Office in due course for submission of the case to CRC for consideration.

2. The UARN (Unique Application Registration Number) for your application is..... It may be referred for future reference.

Date:

(Sign of Divisional Head/  
Head of sponsoring Office)  
Name:.....  
Designation:.....  
Office Stamp:.....

