

**RECOMMENDATION FOR FILLING A VACANT POST**  
*(This form must be submitted at least 6 months prior to post being vacant)*

1. To: The State Secretary,

I hereby submit a report on the following vacancy/vacancies:

No.	Post/Grade	Post ID	Station	With Effect From	Reasons for Vacancy	Filling Method (Refer to Note)

Note: (a) Advertisement  
(b) Appointment of the person(s) named overleaf who is/are\* serving on non-pensionable terms  
(please give relevant details)

Remark(s):

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Date: .....

Signed:.....

Ref. No: .....

Name of Head of Department:.....

Official Stamp:.....

(\*Delete as required)

2. To: The Secretary,  
Public Service Commission

I confirm that:

- (a) The particulars in paragraph 1 are correct.
- (b) There are no objections on financial or establishment grounds to the vacancies being filled with effect from .....

I recommend the above vacant post(s) to be filled.

Date: .....

Signed: .....

*(For State Secretary)*

Ref. No: .....