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NOTIFICATION

No.G.12017/2/98-EDC, the 12th October, 1999. onsequent upon adoption of U.G.C. Scheme on Revision of Pay Scales, minimum qualification for appointment of Teachers in Universities and Colleges and other measures for the maintenance of standards, 1998 as a composite scheme with effect from 1.1.96, vide this Department Notification of even No dt. 12.10.99, the Governor of Mizoram is pleased to order that arrears of pay of an amount of 80% will be paid to the College Teachers with effect from 1.1.96 to those who were in service on or before 1.1.96, as and when Central Share of expenditure is received by the State Govt. of Mizoram, on condition that each individual teacher shall execute on undertaking to the effect that he/she shall not claim the remaining 20% arrear of pay to be made from the State resources for the period from 1.1. 96 to 30.4.99,in view of the financial constraints of the State Govt. as per attached undertaking form.

As for those Teachers appointed after 1.1.96, their pay shall be fixed in the Revised UGC scales of pay with effect from 1.1.96 on notional basis. However, the actual cash benefit will be admissible to them with effect from 1.5.99 only. Arrears of pay from 1.1.96 to 30.4.99 in respect of them will be considered alongwith other State Govt. employees.

The U.G.C. scales of pay and norms will be applicable only to those Colleges and Institutions who are covered by the U.G.C. norms of 1986.

R.K. Singha,
Joint Secretary to the Govt. of Mizoram.

UNDERTAKING

I,————————————————

do hereby promise that 20% of arrears for the period from 1.1.96 to 31.4.99 arising from implementation of the Revised U.G.C. Scales of pay as adopted by the Govt. of Mizoram, will not be claimed by me unless the State Govt. is in a position to release the arrears to its employees for the aforesaid period.

Date———————— Signature————————

Place———————— Full Name————————

Designation————————

Department————————

Name of the College

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Witness :

1. Signature————————

   Name————————

   Designation————————

   Address————————

2. Signature————————

   Name————————

   Designation————————

   Address————————

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