



OSMANIA UNIVERSITY
HYDERABAD-500 007.

No. ²⁸⁶ /Pre-Audit/Gaz/2019

Date: 10-07-2019
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To
All the Principals of Campus & Constituent Colleges,
All the Heads of Departments & Offices, O.U.
Osmania University,
HYDERABAD – 500 007.

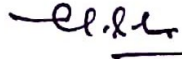
Sir/Madam,

Sub:- University Teachers – Pay Scales – Implementation of
Telangana State Revised UGC Scales of Pay-2016 –
Option Form and Fixation Statements – Reg.

Ref:- 1) G.O. Ms.No.15 Higher Education (UE) Dept. Dated: 29-06-2019.
2) O.U. orders No. 2305/26/2019-2020/Accts/Budget.Gen.
Dated: 09-07-2019.

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In continuation of University orders 2nd cited, this is to bring to the notice of all the concerned that the Option Form and Pay Fixation Format have been hosted on the official website of the University (www.osmania.ac.in) which can be downloaded and submitted in triplicate to the Joint Registrar (Accounts-Pre-Audit), O.U. The option & pay fixation forms can also be had from the Office of the Joint Registrar (Accounts - Pre-Audit), O.U. The teachers are informed to submit the option and pay fixation from at the earliest, so as to complete the fixation and release the revised pay, payable on 1st August 2019.


REGISTRAR

Copy to:-

The President / General Secretary, Osmania University Teachers Association, for information.

FORM OF OPTION

[See Rule 6 (2)]

1. *I, _____ hereby elect the revised pay structure with effect from 1st January 2016.

2. *I, _____ hereby elect to continue on Pay Band and Academic Grade Pay of my substantive / officiating post mentioned below until:

*the date of my next increment / the date of my subsequent increment raising my pay to Rs. _____/- I, vacate or cease to draw pay in the existing pay structure / the date of my promotion/upgradation to the post of _____.
Existing Pay Band and Academic Grade Pay _____

Signature :

Name of the Employee :

COUNTER SIGNATURE OF

Designation :

THE PRINCIPAL / HEAD OF DEPT

Department :

College / Office. :

* to be scored out, if not applicable.

UNDERTAKING

I hereby undertake that in the event of pay having been fixed in a manner contrary to the provisions contained in these Rules, as detected subsequently, any excess payment so made shall be refunded by me to the Government either by adjustment against future payments due to me or otherwise.

Date :

Signature :

Name of the Employee :

Place :

Designation :

Department :

College / Office. :

COUNTER SIGNATURE OF
THE PRINCIPAL / HEAD OF DEPT.

OSMANIA UNIVERSITY

ANNEXURE

**STATEMENT OF FIXATION OF PAY UNDER REVISED U.G.C. SCALES, 2016
(G.O.MS.No.15, HIGHER EDUCATION (UE) DEPARTMENT, DATED: 29-06-2019)**

1.	Name of the University Employee	
2.	Designation of the post in which pay is to be fixed as on January 01-01-2016	
3.	Status (Substantive / Officiating)	
4.	Pre-revised Pay Band and Academic Grade Pay or Scale	
5.	<p><u>Existing Emoluments</u></p> <p>a) Basic Pay (Pay in the applicable Pay Band plus applicable Academic Grade Pay or basic pay in the applicable scale) in the pre-revised structure as on January 2016 (01-01-2016).</p> <p>b) Dearness Allowance sanctioned with effect from 01-01-2016 (125%)</p> <p>c) Existing emoluments (a+b)</p>	
6.	Basic pay (Pay in the applicable Pay Band plus applicable Academic Grade Pay or Basic pay in the applicable scale) in the pre-revised structure as on January 1, 2016.	
7.	Applicable Level in Pay Matrix corresponding to Pay Band and Academic Grade Pay or Scale shown at S.No.4.	
8.	Amount arrived at by multiplying basic pay as at Sl.No.6 by 2.57	
9.	Applicable Cell in the Academic Level either equal to or just above the Amount at Sl.No.8	
10.	Revised Basic Pay (as to Sl.No.9)	
11.	Revised pay with reference to the Substantive Pay in cases where the pay fixed in the officiating post is lower than the pay fixed in the substantive post if applicable (Rule 7 (11))	

P.T.O.

12.	Date of next increments (Rule 10) and pay after grant of Increment:		
	Date of increment	Pay after Increment in applicable Level of Pay Matrix.	Remarks
13.	Any other relevant information.		

Station:

Date :

Office :

Signature :

Name of the Employee :

Designation :

Department :

College / Office. :

COUNTER SIGNATURE OF
THE PRINCIPAL / HEAD OF DEPT.