

ANNEXURE – V

APPLICATION FOR FINANCIAL ASSISTANCE TO THE FAMILY

(Vide Rule – 26)

1. Full name and address of the applicant
(Nominee of the Employee) in block letters:
2. Name and Address of the Employee :
3. Code Number :
4. Name and Address of the Institution in
which the employee was in service at
the time of death :
5. Date of birth and Age of the Employee :
6. (i) Date of death :
(ii) Date of entry in Service of the Institution :
7. Date of option to come over to the scheme :
8. Rate of contribution :
9. Whether recovery was regularly effected :
10. i) Total amount recovered
till the time of death :
ii) Total amount contributed by the
Institution :
iii) Total amount to his/her credit :
11. Whether nomination was accepted by
the employee :
12. Amount claimed :

Place:

Date: Signature of the Applicant

I certify that to the best of my knowledge and belief, the particulars given above are correct and also certify that the amount claimed is admissible as per rules approved in Government Order.

Place:

Date: Name and Signature of the
President of the Institution

(Office seal)

Countersigned by the :-

Head of Department /District/Taluk
level Officer of the concerned
Administrative Department of
Government.

Place:

Date: (Office Seal)

Signature:

(Name and Designation)