

RANCHI UNIVERSITY, RANCHI

Application for Pension (Other than Family Pension) And Gratuity

1. Name of the Employee :
2. Father's Name :
3. Name of the Spouse :
4. Religion & Nationality :
5. Post held :
6. Date of Birth :
7. Date of beginning of service :
8. Date of confirmation or substantive appointment to the permanent post in the University (specify the post of the College/Dept/Institution Office where held) :

9. Date of ending of service :
10. Interruptions in the service, if any :
11. Net completed half years reckonable for Pension/Gratuity
12. Class of pension/gratuity admissible :
13. Rate of emolument last drawn : Basic AGP D.A M.A HRA Total

14. Proposed Pension :
15. Proposed Gratuity :
16. Proposed Family Pension :
17. Place of payment :
18. No. of applicant's Individual Bank Account to which the Pension/Gratuity is to be credited. :
19. Phone No :
20. Pan No.(Xerox copy attached) :
21. Adhar No.(Xerox copy attached) :

22. Signature of the applicant :

23. Address :

Date

Signature of Head of Institution/Registrar

RANCHI UNIVERSITY, RANCHI

Summary of Service record to be furnished by the Head of
the Institution/Registrar, Ranchi University, Ranchi

- 1. Name of the employee :
- 2. Designation :
- 3. Date of appointment :
- 4. Date of Retirement / Superannuation :
- 5. Interruption in service, if any :
- 6. Details of service, if any, rendered
outside the University :
- 7. Total length of qualifying service : Yearsmonths..... Days

Certified thatdesignation..... who superannuated/retired
(of will superannuate/retire) onhas renderedcompleted half years
qualifying service for grant of pension by the Ranchi University.

Date :

Signature of Principal/Head of the Institution/Registrar

RANCHI UNIVERSITY, RANCHI

UNDERTAKING

I do hereby undertake to refund any portion full
amount of pension and gratuity if paid in excess to me due to any error in calculation.

Place :

Signature of the applicant

Date :

Designation:

RANCHI UNIVERSITY, RANCHI

Memo of calculation of average emoluments

Certified that Shri/Smt..... designation.....
who superannuated/ retired (Will superannuate/will retire) on.....has/will have drawn the
following emoluments for the last ten months prior to the date of his/her superannuation/ retirement.

Sl. No.	Months	Emoluments			
		Pay Band	AGP/GP	Total Basic Pay	Any other amount qualifying for pension
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
Total Rs.					

10 Month Average emolument :Rs.

Signature

Principal/Head of the Institution/Finance Officer

- Note:
1. In case of those on leave, with allowances, emoluments will comprise the amount which the employee would have drawn but for proceeding on leave.
 2. In case of an employee who was on leave or under suspension immediately before his/her retirement/superannuation, his/her emoluments will mean the amount (i) which he/she draws immediately before proceeding such leave/suspension

RANCHI UNIVERSITY, RANCHI

Memo of calculation of Pension and Family Pension:

1. Name of the Employee :
2. Designation :
3. Date of appointment :
4. Date of retirement :
5. Length of qualifying service :
6. Average monthly emoluments :
7. Calculation of Pension :
8. Pension fixed at Rs. : Rs..... per month
(in figures and words) Rupees per month
9. Calculation of family pension :
10. Family pension fixed at Rs. : Rs..... per month
(in figures and words) Rupees per month

Principal/Head of the Institution/Finance Officer

RANCHI UNIVERSITY, RANCHI

Memo of calculation of gratuity

1. Name of the Employee :
2. Designation :
3. Date of appointment :
4. Date of retirement :
5. Total Length of qualifying service :
6. Emoluments reckonable for gratuity :
7. Calculation of gratuity :
8. Amount of gratuity payable at : Rs..... per month
(In figures and words) Rupees per month

Principal/Head of the Institution/Finance Officer

RANCHI UNIVERSITY, RANCHI



PHOTOGRAPH (3 Copies)

Joint Photograph of Smt.and Srior
single photograph of Smt./Sriduly attested by the Head of the Institution/Officer.

In the case of Widow/Widower/Unmarried persons in the case Purdanashin lady the following particulars are to be furnished.

1. Name of the applicant :
2. Height of the applicant :
3. Personal identification :

Attested by
Principal/
Head of the
Institution/Registrar

RANCHI UNIVERSITY, RANCHI

DECLARATION OF THE APPLICANT

I hereby declare that I have neither applied for nor received any pension or gratuity in respect of any portion of the service included in this application and in respect of which pension or gratuity is claimed here in nor shall I submit an application herein after without quoting a reference to this application and to the orders which may be passed thereon.

Place :

Date :

Signature of the applicant

Designation

RANCHI UNIVERSITY, RANCHI

Slip bearing Specimen signature of the applicantand his/her Wife/Husband duly attested by the Head of the Institution/Office, (**3 copies**).

Specimen Signature of the applicant

Specimen signature of his/her wife/husband

- 1.
- 2.
- 3.
- 4.

- 1.
- 2.
- 3.

Signatures attested by Head of the Institution/Officer

Thumb and finger impressions in case persons not Literate enough to sign his/her name :

Thumb	1 st Finger	2 nd Finger	3 rd Finger	4 th Finger

Thumb and finger impressions of Shri/Smt.are attested.

Principal/Head of the Institution/Registrar

Note: Male will give impression of the left hand fingers and female will give impressions of reight hand fingers.

RANCHI UNIVERSITY, RANCHI

List of surviving members of Family of Shri/Smt.....

Sl. No.	Name of the wife/husband Sons/daughters	Relationship with the applicant	Age	Married or unmarried along with date of marriage in the case of daughters
1				
2				
3				
4				
5				
6				
7				
8				

Place :

Date :

Signature of the applicant

Designation

RANCHI UNIVERSITY, RANCHI

FORM OF NOMINATION

(3 Copies)

(When the subscriber has a family and wishes to nominate one member thereof)

GENERAL PROVIDENT FUND

RETIREMENT/DEATH GRATUITY

GROUP INSURANCE

COMMUTATION VALUE OF PENSION

I, hereby, nominate the persons mentioned below, who is a member of my family and as defined under the statues to receive the amount that may stand to my credit or that may be sanctioned by the University under the relevant statutes/rules in the event of my death before that amount has become payable or having become payable has not been paid

Name & address of Nominee	Relationship with employee	Age	Contingencies on the happening of which the nomination shall become invalid	Name, relationship, address and Age of person(s), if any to whom the right of nominee shall pass in the event of the nominee predeceasing the subscriber (indicate the share of each)

This nomination supersedes the nomination made by me on which stands cancelled.

Dated this..... day of 20..... at

(Two witnesses for signature)

Signature.....

Designation.....

Dept/Section.....

Signature of employee

Signature.....

Designation.....

Dept/Section.....

Designation

Department/Section.....

Note: Separate nomination form for each
Copy to be pasted in service book.