

**DELHI COLLEGE OF ARTS AND COMMERCE
(UNIVERSITY OF DELHI)
NETAJI NAGAR : NEW DELHI-110023**

Dated: 27.02.2019

NOTICE

All Teaching and Non-teaching staff members are hereby requested to contact Establishment Department of the college alongwith one passport size photograph latest by 08th March 2019 regarding updation of their Service Book and also submit their Details of Family, Home Town Declaration and Common Nomination Form for Gratuity, General Provident Fund and Central Government Employees' Group Insurance Scheme as per the prescribed performa available at Establishment Department as well as college website.


(Dr. Rajiv Chopra)
OSD-Principal

Copy to:

1. Teaching Staff Notice-Board
2. General Office
3. Account Office
4. Library
- ✓ 5. Sr. P. A. to Principal
- ✓ 6. Upload the copy of this Notice as well as prescribed performas at the college website at appropriate place.

Form 1

Common Nomination Form for Gratuity, General Provident Fund and Central Government Employees' Group Insurance Scheme

[See Rule 53 of CCS (Pension) Rules, 1972, Rule 5 of General Provident Fund (Central Services) Rules, 1960 and Para 19.7 of Central Government Employees' Group Insurance Scheme, 1980]

I,, hereby nominate the person/persons mentioned below and confer on him/her/them the right to receive in the event of my death, to the extent specified below, amount on account of the following:

- i. any gratuity the payment of which may be authorised under rule 50 of CCS (Pension) Rules
- ii. amount that may stand to my credit in the General Provident Fund
- iii. any amount that may be sanctioned by the Central Government under the Central Government Employees Group Insurance Scheme, 1980

Name, date of birth (DOB) and address of the nominee	Relation-ship with employee/pensioner	Share to be paid to each	If nominee is minor, name, DOB and address of person who may receive the amount on behalf of minor	Name, DOB, relationship and address of alternate nominee in case the nominee under Column (1) predeceases the employee/pensioner	Share to be paid to each	Name, DOB and address of person who may receive the amount if alternate nominee in Col. (5) is a minor	Contingency on happening of which nomination shall become invalid
1	2	3	4	5	6	7	8

These nominations supersede any nominations made by me earlier.

Place and date:

Signature of Government servant
Telephone No.

Note 1 : Completely strike out the benefits for which nomination is not intended to be made. Separate copies of this nomination Form may be used for nominating different persons for benefits (i), (ii) and (iii) above

Note 2 : The Government servant shall draw lines across the blank space below the last entry to prevent the insertion of any name after he/she has signed. The nominee(s)/alternate nominee(s)' shares together should cover the whole amount.

(To be filled in by the Head of Office/authorised Gazetted Officer)

Received the nominations, dated, under the following Rules :—

1. Central Civil Services (Pension) Rules, 1972 for Gratuity
2. General Provident Fund (Central Services) Rules, 1960
3. Central Government employees Group Insurance Scheme, 1980

made by Shri/Smt./Kumari.....

Designation.....

Office.....

(Strike out which nomination is not received)

Entry of receipt of nomination(s) has been made in page Volume.....of Service Book.

Name, Signature and Designation of Head of Office/authorised Gazetted Officer with seal

Date of receipt.....

The receiving Officer will fill the above information and return a duly signed copy of the complete Form to the Government servant who should keep it in safe custody so that it may come into the possession of the beneficiaries in the event of his/her death.

The receiving officer shall put his/her dated signature on both pages of this Form.

FORM No.3
Details of Family

[See Rule 54 (12) of CCS (Pension) Rules, 1972]

Name of the Government servant: _____

Designation: _____

Date of Birth: _____

Date of Appointment: _____

Details of the members of my family as on: _____

S. No.	Name of the members of family*	Date of Birth	Relationship with the officer	Initials of the Head of Office	Remarks
(1)	(2)	(3)	(4)	(5)	(6)
1					
2					
3					
4					
5					
6					
7					
8					
9					

I hereby undertake to keep the above particulars up to date by notifying to the Head of office any addition or alteration.

Signature of Government Servant

Place:

Date:

* Family for this purpose means family as defined in clause (b) of sub-rule (14) of Rule 54 of the CCS (Pension) Rules, 1972.

Note: Wife and husband shall include respectively judicially separated wife and husband.

FORM

HOME TOWN DECLARATION

[OM No. 43/15/57-Estts. (A) dated 24-6-1958]

I, _____ hereby declare that my home town is at the place as shown below for the purpose of availing my self of the Travel Concession as notified in the Govt. of India, Ministry of Home Affairs, New Delhi O.M. No. 43/1/55/Estts - (A) Part-II dated 11-1-1956 conveyed vide Secretary (Finance) to the Delhi Administration endorsement No. F 13(3) / 54 / Finance dated 22-12-1956.

Name of State	Name of the District	Name of the Village	Name of the Railway station	Remarks
1.	2.	3.	4.	5.

Signature of the Govt. Servant

Nomination by _____
Designation _____
Date of receipt of nomination _____

Signature of Head of Office _____
Date _____
Designation _____