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Application for admission to the General Provident Fund (To be submitted in duplicate)

Full Name (in Block Letters):
 Fathers/Husband's Name:

3.	(i) Official Designation:
	(ii) Employee ID:
	(iii) Mobile No.:
	(iv) E-Mail ID:
	(Mobile & E-Mail ID to be used for communication by A.G.'s Office)
4.	Date of Birth:
5.	(i) Date of Initial Appointment:
	(ii) Date of appointment in present post:
6.	Date of Superannuation:
7.	Office to which attached, if on deputation, state the parent Department, Government also:
8.	Service to which the applicant belongs:
9.	Whether applicant's service is pensionable or not:
10	. Whether the applicant is permanent, temporary or re-employed. If temporary, give the date of commencement of service:
11	. Rate of emoluments drawn per month:
12	. Rate of subscription per month:
13	. Whether the individual is a compulsory or optional subscriber:
14	. If subscriber was subscribing to any other fund, the name of such fund, A/c No, Copy of latest slip:
15	. Whether the applicant has a family or not:
16	. Account No. to be allowed by the Accounts Officer:
17	. Remarks:
A form of Nomination in the prescribed from, duly filled up, is enclosed.	
	tion:
Dat End	e: :losures:
NO.	Signature of the applicant
NO	1. Enclose an attested copy of Service Register in support of date of birth and date of
	initial appointment. 2. In respect of employees already having class IV GPF/ZPPF, the proposals to be
	forwarded through the DTO/PAO/CEO, ZP concerned.
After allotment of GPF account number by this office, the balance at the credit of the previous account shall immediately be transferred by the DTO/PAO/CEO, ZP concerned to the new account along with month wise details of last 5 years transactions in the previous account.	
	Signature of the Head of Office Designation:
Cou	unter Signature of*:
Dic	trict Treasury Officer
2ام	/Chief Executive Officer, Zilla Parishad
	*In case of employees having class IV GPF or ZPPF accounts.