

FORM 4
{See Rules 50(15), 57, 58, 59, 60, 62, 74, 79 and 80}

DETAILS OF FAMILY

Important

1. The original Form submitted by the Government servant is to be retained. All additions/alterations are to be communicated by the Government servant/pensioner along with the supporting documents and the changes shall be recorded in this Form under the signature of Head of Office in column (7). No new Form will substitute the original Form. However, the retiring Government servant should submit the details of family afresh along with Form 6.
2. The details of all members of family (whether eligible for family pension or not) including spouse, all children, parents /parents in law and disabled siblings (brothers and sisters) may be given.
3. The Head of Office shall indicate the date of receipt of communication regarding addition or alteration in the Family in the 'Remarks' column. The fact regarding disability or change of marital status of a family member should also be indicated in the 'Remarks' column.
4. Wife and husband shall include judicially separated wife and husband.
5. The pensioner shall intimate the details of change in family structure after retirement in Form 5.
6. **Copies of birth certificates to be attached. If birth certificate is not available, then copy of any other certificate, as proof of date of birth, may be attached.**

Name of the Government servant		Designation		Nationality	
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Details of family members:

S. No.	Name	Date of Birth (DD/MM/YYYY)	Aadhar No.* (voluntary)	Relationship with Govt. servant	Marital status	Remarks	Dated signature of Head of Office
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

I hereby undertake to keep the above particulars upto date by notifying to the Head of Office any addition or alternation.

E-mail: (Optional) **Place:**

Mobile: **Date:** **(Signature)**

* Providing Aadhaar No. is voluntary. However, if it is provided, consent to link it to Bank Account and also for authentication of identity from UIDAI for pension related purpose only, if presumed.

DETAILS OF FAMILY FOR THE PURPOSE OF C.G.H.S. BENEFITS *

Name of the Government servant :

Designation :

Date of birth :

Date of appointment :

Details of the members of my Family * : As on _____

Sl 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

I hereby undertake to keep the above particulars upto date by notifying to the Head of officer any additional alternation.

Place:

Date:

Signature of the Govt. servant

* Family for this Purpose means and includes (As per CGHS Rules)

1. Husband/Wife
2. Dependent Parents
3. Parents-in-law or parents (for female Govt. servants) at her option
4. Dependent Children (irrespective of age)
5. Sons suffering from permanent disability
6. Widowed / Divorced/Separated daughters
7. Unmarried/widowed sisters
8. Dependent brothers
9. Step-Mother

DETAILS OF FAMILY FOR THE PURPOSE OF LEAVE TRAVEL CONCESSION *

Name of the Government servant :

Designation :

Date of birth :

Date of appointment :

Details of the members of my Family * : As on _____

Sl 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

I hereby undertake to keep the above particulars upto date by notifying to the Head of officer any additional alternation.

Place:

Date:

Signature of the Govt. servant

* Family for this Purpose means and includes (As per LTC Rules)

1. Husband/Wife and two surviving unmarried children or stepchildren wholly dependent on the Govt. servant
2. Dependent Parents/Step Mother
3. Dependent Children (irrespective of age)
4. Dependent Widowed / Divorced/Separated daughters
5. Unmarried Minor brothers/sisters wholly dependent on the Govt. servant

FORM OF NOMINATION FOR GENERAL PROVIDENT FUND

I _____ hereby nominate the person(s) mentioned below who is/are member(s)/Non-member(s) of my family as defined in Rule 2 of the General Provident (Central Services) , Rules, 1960 to receive the amount that may stand to my credit in the fund as indicated below, in the event of my death before that amount has become payable or having become payable has not been paid:-

Name and address of nominee(s)	Relationship with the subscriber	Age of the nominee(s)	Share payable to each nominee(s)	Contingencies on the happening of which the nomination will become invalid	Name, address and relationship of the person(s) if any to whom the right of nominee shall pass in the event of his/her predeceasing the subscriber	If the nominee is not a member of the family as provided in Rule 2, indicate the reasons
1	2	3	4	5	6	7

Dated this _____ day of _____ at _____

Two witnesses to signature and their Name & Address

Signature of the subscriber _____

Name in block letter _____

Designation _____

1. _____

2. _____

SPACE FOR USE BY THE HEAD OF OFFICE

Nomination by Shri/Smt./Km. _____

Designation _____

Date of receipt of nomination: _____

Signature of Head of Office

Designation _____

Date: _____

Instructions for subscriber:-

- a) Your name may be filled in
- b) Name of the fund may be completed suitably
- c) Definition of term "Family" as given in the General Provident Fund (Central Services) Rules, 1960 is reproduced below:-
Family means:-

- 1) In the case of male subscriber, the wife or wives, parents, children, minor brothers, unmarried sisters, deceased son's widow and children and where no parents of the subscriber is alive, a parental grandparent; provided that if a subscriber proves that his wife has been judicially separated from him or has ceased under the customary law of the community to which she belong to be entitled to maintenance she shall henceforth be deemed to be no longer a member of the subscriber's family in matter to which these rules relate, unless the subscriber subsequently intimates in writing to the Accounts Officer that she shall continue to be so regarded;
- 2) In the case of female subscriber, the husband, parents, children, minor children and where no parents of the subscriber is alive, a paternal grandparent; provided that if a subscriber by notice in writing to the Accounts Officer expresses her desire to exclude her husband from her family, the husband shall henceforth be deemed to be no longer a member of the subscriber's family in matters to which these rules relates, unless the subscriber subsequently cancels such notice in writing.

NOTE: Child means legitimate child and includes an adopted child where adoption is recognized by the personal law governing the subscriber

- d) Col. 4 If only one person is nominated the words "in full" should be written against the nominee. If more than one person is nominated; the share payable to each nominee over the whole amount of the PF shall be specified.
- e) Col. 5 Death of nominee (s) should not be mentioned as contingency in this column.
- f) Col. 6 Do not mention your name.
- g) Draw line across the blank space below last entry to prevent insertion of any name after you have signed.

Note: A nomination shall become invalid in case of a subscriber who had no family at the time of nomination subsequently acquires a family.

FORM -VII
NOMINATION FOR BENEFITS UNDER THE CENTRAL GOVT.
EMPLOYEES GROUP INSURANCE SCHEME- 1980

When the Govt. servant has no family and wishes to nominate person or more than one person

I, _____ having no family, hereby nominate the person/persons mentioned below and confer on him/them the right to receive to the extent specified below any amount that may be sanctioned by the Central Govt. under the Central Govt. Employees Group Insurance Scheme, 1980 in the event of my death while in service or which having become payable on my attaining the age of superannuation may remain unpaid at my death.

Name & Addresses of nominee/ nominees	Relationship with the Govt. Servant	Age	Share of Amount To be paid to each	Contingencies on the happening of which the nomination shall become invalid	Name, address & relationship of the person, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the Govt. Servant.
1	2	3	4	5	6

Dated this _____ day of _____ 20 at _____

Two Witnesses Signatures:

- 1.
- 2.

Signature of the Govt. Servant
Name _____
Designation: _____

FORM- VIII

**NOMINATION FOR BENEFITS UNDER THE CENTRAL GOVT.
EMPLOYEES GROUP INSURANCE SCHEME – 1980**

When the Govt. servant has a family and wishes to nominate one member or more than one member, thereof

I, _____ hereby nominate the person/persons mentioned below who is/are member/members of my family and confer to him/them the right to receive to the extent specified below any amount that may be sanctioned by the Central Govt. under the Central Govt. Employees Group Insurance Scheme, 1980 in the event of my death while in service or which having become payable on my attaining the age of superannuation may remain unpaid at my death.

Name & addresses of nominee/nominees.	Relationship with the Govt. Servant.	Age	Share of amount to be paid to each	Contingencies on the happening of which the nomination shall become invalid	Name, address & relationship of the person, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the Govt. servant.
1	2	3	4	5	6

Dated this _____ day of _____ 20..... at _____ -

Two witnesses signatures

- 1.
- 2.

Signature of the Govt. Servant
Name _____
Designation _____

FORM 'B'

NOMINATION FOR FAMILY PENSION

I hereby nominate the persons mentioned below, who are members of my family, to receive in the order shown below the family pension which may be granted by Government in the event of my death after completion of 10 years qualifying service.

Name & address of nominee	Relationship with Officer	Age	Whether married or unmarried

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

N.B. The officer should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this day of 20....

Witnesses to signature

1.
2.

Signature of Govt. Servant

(To be filled in by the head of office in the case of a non-gazetted officer)

Nomination by

Signature of Head of Office

Designation

Date

Office :

Designation

FORM – I

NOMINATION FOR DEATH – CUM- RETIREMENT GRATUITY

When the Govt. servant has a family and wishes to nominate one member or more than one member, thereof.

I, _____, hereby nominate the person/persons mentioned below who is/are member/members of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity the payment of which may be authorized by the Central govt. in the event of my death, while in service and the right to receive on my death, to the extend specified below, any gratuity which having become admissible to me on retirement may remain unpaid ay may death.

Original nominee (s)				Alternate nominees(s)	
Name & addresses of nominee/nominees	Relationship with the Govt. Servant.	Age	Amount or share of gratuity payable to each	Name, address, relationship & age of the person/persons if any to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Govt. servant or the nominee dying after the death of the Govt. servant but before receiving payment of gratuity	Amount or share of gratuity payable to each

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

Dated this day of at

Witness to signature

1.
2.

Signature of Govt. Servant

(To be filled by the Head of Office)

Nominated by _____
Designation _____

Office Department of Legal Affairs
 'A' Wing, 4th Floor, Shastri Bhawan
 New Delhi

Signature of Head of Office
Designation :
Date:

FORM-II

NOMINATION FOR DEATH –CUM- RETIREMENT GRATUITY

When the Govt. Servant has no family and wishes to nominate one person or more than one person

I, _____, have no family, hereby nominate the person/persons mentioned below and confer on him/them the right to receive, to the extent specified below, any gratuity the payment of which may be authorized by the Central Govt, in the event of my death, while in service and the right to receive on my death, to the extent specified below, any gratuity, which having become admissible to me on retirement may remain unpaid at my death.

Original nominee (s)				Alternate nominee (s)	
Name & addresses of nominee/nominees	Relationship with the Govt. servant.	Age	Amount or share of gratuity payable to each.	Name, address, relationship & age of the person/persons if any to whom the right conferred on the nominee predeceasing the Govt. servant or the nominee dying after the death of the govt. servant but before receiving payment of gratuity.	Amount or share of gratuity payable to each.

This column should be filled in so as to cover the whole amount of the gratuity.

The Amount/share of the gratuity shown in this column should cover the whole Amount/share payable to the original nominee(s).

This nomination supersedes the nomination made by me earlier on 200... which stands cancelled.

Note: (i) The govt. servant should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this day of 20.... at

Witness to signature

3.

4.

Signature of Govt. Servant

(To be filled by the Head of Office)

Nominated by _____

Designation _____

Office _____

Signature of Head of Office

Designation :

Date: