

Important Instruction of RRB candidates for reporting to GTL division

1. Your reporting for joining to the post of goods guard on Guntakal Division is placed on website along with Offer of appointment and other requisite forms.
2. You are advised to report to Recruitment Section, Sr.DPO's Office, Guntakal Division, Guntakal, Anantapur district, A.P - 515801 as per scheduled date and time.
3. You have to download, Offer of appointment and all the necessary documents i.e. Attestation form, Character Certificate, Caste certificate, NPS forms from the following website and produce the same duly filled. Also bring your 10 Passport size photograph, PAN card, Aadhar card, Bank Pass book and all the original educational qualification/community certificates and two sets of Xerox at the time of reporting to GTL division without fail.

<https://scr.indianrailways.gov.in>

About us → Divisions → Guntakal → Department → Personnel

4. You have to follow all COVID related protocols during your reporting to GTL division.
5. Enquiry No.9346006529 (During office hours only).



SOUTH CENTRAL RAILWAY

BY REGISTERED POST / ACK DUE

Office Seal

No.SCR/P- / /Rectt/Group C/2022

Date: .2022

To

Sub: Temporary appointment for the post of ---- in Pay Matrix in Level- **of 7th CPC** (GP ---- in 6th CPC) in -----Department, ----- in -----
(Division/Unit) on **DR/Sports/Scouts & Guides quota/Compassionate Grounds**

Ref: Lr. No. ----- dated -----.

* * *

1) With reference to your application, you are hereby offered appointment to the post of ----- on purely temporary basis in Pay Matrix in **Level- of 7th CPC** in ----- Department on Basic pay/Stipendiary pay of Rs._____/p.m. plus Allowances admissible as per rules issued from time to time during the training period.

2) You are therefore, advised to report to this office on or before _____ at 10.00 hrs on any of the working day for sending you for medical fitness examination subject to fulfilling the following terms and conditions:

i) Your appointment will be subject to all the rules and regulations issued by the Government of India and Railway administration from time to time. You must be prepared to serve anywhere on Indian Railways in terms of Rule-226 chapter-II of Indian Railway Establishment Code, Vol-I.

ii) As per Para -105, Chapter-I, Section-B, Sub-section-I, you will have to pass the necessary Medical Examination before your appointment, for which you have to pay Rs.24/- (Rupees twenty four only) towards Pre-Recruitment medical examination fee.

iii) You should also bring six recent passport size photographs for your medical examination.

iv) You should bring your original High School Certificates/School Transfer Certificate/ University/College Certificates in support of your date of birth, educational Qualifications, caste etc., for verification along with Xerox copies (02 Sets) duly attested by a Gazetted Officer.

v) If you belong to Schedule Caste/Tribes/Other Backward Class (with Sub. Caste/group) you will have to produce original caste certificate in the prescribed form issued by the District Magistrate/ Addl. Magistrate/ Collector/Dy. Commissioner/ Sub-Divl. Magistrate or Taluq Magistrate not below the rank of Tahsildar of your District.

vi) If you are in Government / Quasi Government Service, you will have to bring a certificate to the effect that you have severed connections with your employer and if the statement is found incorrect you will be taken up under disciplinary rules in force. Declaration should be given whether you have applied for any post outside the Railway, i.e., Central /State Government/PSUs /Autonomous Bodies regulated by Govt. of India.

vii) In case of Technical post, you will have to produce an Indemnity Bond duly affixing a Special Adhesive stamp (not court fee stamp) of the value of Rs. 10/- (Rupees Ten only) binding yourself and surety who should be State or Central Govt. or equal Govt. employee and whose Pay Matrix is Level - 6 of 7th CPC and above (GP Rs. 4200/- and above), in connection with the conditions stipulated for imparting training by Railway Administration.

viii) In the event of your failure to satisfy the conditions stipulated in para - vi & vii above, the cost of the training i.e., the stipend during the training along with 12 ½% interest thereon, excluding travelling allowance, if any will be recovered. Failing which necessary legal proceedings will be initiated to recover the training cost from the sureties who stand at the time of executing the indemnity bond with the Railways.

ix) Your appointment in the working post will be subject to satisfactory completion of your training/probation and only if your work is found to be satisfactory, you will be continued in service. If you fail to show satisfactory progress, your services are liable to be terminated as per extant rules. This does not however, preclude the Railway Administration from terminating your service without assigning any reasons and you will have to complete training and will not be allowed to withdraw from training except for any reason which is beyond your control. The cost of training and other allowances if any will be recovered from you with interest. If you fail to remit the said costs, the same will be recovered from the sureties on your behalf.

x) The candidates considered for ministerial posts (Jr. Clerk/Sr. Clerk) through the mode of compassionate grounds/Sports/Scouts & Guides etc., should pass the typewriting test within the prescribed time limit.

xi) After successful completion of training, you will have to serve the Railway Administration for a minimum period of 05 years.

xii) No guarantee/promise of employment is given but on the satisfactory completion of training you will be eligible for appointment as temporary _____ in Pay Matrix in Level ____ of 7th CPC (GP Rs. _____) subject to availability of a vacancy. You will be on probation for period of 02 years from the date of joining the working post.

xiii) Your continuance in the service is subject to your satisfactory performance in the duties prescribed for the post you held OR **else suitable action as deemed fit will be initiated against you as per extant instructions in force.**

xiv) You will be governed by National Pension System in terms of Railway Board's instructions under CPO/SC S.C. No. 10/2004 & 32/2004. If you are already serving employee you are eligible for existing benefits under extant rules.

xv) You will be held responsible for the charge and care of government money, goods and stores and all other property that may be entrusted to you.

xvi) Your appointment will be subject to the character verification from the District Collector. In case any adverse report is received from Dist. Collector, this offer of appointment will stand cancelled.

xvii) You will be required to take oath of allegiance or make an affirmation in the prescribed form at the time of appointment. You should furnish declaration regarding plural marriage as prescribed in Railway Board's Lr No. E/54/PR - 1/2643, dated 20.12.1954 and subsequent amendments issued from time to time which will be explained to you when you report to this office.

xviii) You will be governed by Liberalized Leave Rules, contained in Chapter-5 of Indian Railway Establishment Code, Vol. I, as amended from time to time.

xix) Your pay/stipend will commence from the date you join the duty at the station/ Training center as the case may be to which you are posted for training on being medically found fit.

xx) You will be required to make your own arrangements to stay at ----- for 15 days when you report for medical examination. You may also have to join the training immediately after appointment orders issued. Hence, you are required to come fully prepared to stay at ----- till all the formalities required for appointment are completed and also to join the training if scheduled dates of training coincide with your appointment order.

xxi) In case of CG candidates, in terms of Railway Board's instructions under CPO/SC's S.C. No.194/2000, you are required to give an undertaking in the prescribed proforma enclosed that you will look after the family members who have been dependent on the deceased Railway employee and in case it is proved subsequently that the family members are neglected or are not being properly maintained by you, your appointment will be terminated forthwith.

xxii) You should produce the certificate of caste in the proforma enclosed and if the verification reveals that the claim of belonging to SC/ST/OBC /EBC is false, your services will be terminated without assigning any further reasons without any prejudice to such further reasons/action to be taken under provision of Indian Penal Code for production of false certificate in terms of Railway Board's Lr. No.90/E (SCT) 1/31/1 dated: 25.05.1990 circulated vide CPO/SC's S.C.No.84/90.

xxiii) You should bring a certificate of character in the proforma enclosed herewith, from the Head of the Educational Institution/Technical Institution where last studied by you and similar certificate from your employer, if any. This certificate should be got attested by Stipendiary First Class Executive Magistrate or District Magistrate or Sub- Divisional Magistrate. You cannot be appointed without this certificate.

xxiv) You have to pass the initial training course in the first attempt. If you fail in the end examination your appointment will be cancelled forthwith. A repeat course at the discretion

of the administration will be given without stipend. However, SC/ST candidates will be given a second chance with stipend and a third chance, if considered necessary, without stipend subject to further conditions.

xxv) As long as your appointment remains temporary, your services may be terminated at any time as per the existing rules.

xxvi) It may please be noted that you are liable to be posted anywhere in ---- Division/Unit depending upon the vacancy position. It may also be noted that the nature of work involve performing night /shift duties and if you are agreeable to the conditions only, your case for absorption will be considered. You may also furnish a written declaration to the effect in the proforma attached.

3) If you intend to take up the appointment offered to you, on these conditions you will be required to signify your acceptance in the declaration enclosed. In the event of your acceptance please report in the office of the -----**South Central Railway,**
on or before: _____

4) Please note that if you fail to report to this office within the date specified, it will be understood that you are not inclined to accept the appointment and the offer will be treated as withdrawn and no further correspondence will be entertained.

NOTE:

1) Please submit Two (02) sets of copies of PAN CARD, AADHAR CARD & Educational Qualification certificates duly attested by Gazetted officer, to maintain your personnel file

2) ATTESTATION FORM is enclosed. Please make 04 copies before filling the Attestation Form and duly filled in your own hand writing along with your recent photograph affixed in 4 sets.

3) Please report in this office on any working day except on Saturdays, Sundays and General Holidays.

Encl: 1) As above

2) A Single Journey II Class free pass bearing No. _____
Dated: _____ from _____ to valid up to _____
Is enclosed (This is admissible to SC/ST Candidates only).

Signature of the Appointing Authority

Affix Rs.10/- Special Adhesive Stamp before filling the form

DEED FOR INDEMNITY

This DEED of Indemnity made this _____ day of _____ 20

By Sri _____ S/o _____

Residing at _____

(herein after referred to as 'TRAINEE/APPRENTICE' which expression shall includes his heirs, executors, administrators and representatives where the context so admits) and

Sri _____ S/o _____

residing at _____

(hereinafter referred to as 'SURETY' which expression shall include his heirs, executors, administrators and representatives where the context so admits) of the

ONE PART and the PRESIDENT OF INDIA, Owner and administrator of the South Central Railway hereinafter referred to as "THE GOVERNMENT" of the OTHER PART.

WHEREAS the Government has engaged the trainee/apprentice on the terms and conditions mentioned in the joining report dated _____ executed by and between the trainee/apprentice and the Government.

AND WHEREAS one of the terms and conditions to the said engagement of the trainee/apprentice is that the trainee/apprentice shall complete the prescribed training and after such completion shall accept service under the government and serve the Government for a minimum period of Five years and if the trainee/apprentice deserts service or resigns from service during the period of training or thereafter without the written consent of the Government or is discharged there from for misconduct or any other offense as enumerated in the deed, the trainee/apprentice shall repay on demand by the Government the whole cost of training or pay any other amounts, excluding traveling and running allowances drawn by the trainee/apprentice from the Government under these terms and conditions.

AND WHEREAS the surety has agreed to indemnify and or to reimburse the Government to the extent.

NOW THESE PRESENTS WITNESS AND it is hereby agreed by and between the parties as follows.

- That in consideration of the promises and in consideration of the Government agreeing to engage the trainee/apprentice for the course mentioned in the joining report referred to above, the trainee/apprentice, after completing the training satisfactorily, shall serve the Government for a minimum period of five years thereafter in accordance with the said joining report executed between the trainee/apprentice and the Government to the complete satisfaction of the Government (decision of the Government about which shall be final conclusive).

SIGNATURE OF THE CANDIDATE

SIGNATURE OF THE SURETY:

- That the trainee/apprentice and the surety hereby undertake jointly and severally to indemnify and reimburse the Govt that extent as aforesaid.
- That in the event of the trainee getting adverse report regarding the progress of his training of studies or conduct or on discontinuing his studies or being discharged from the course or on refusal to continue for any reasons not beyond the control of the trainee or does not continue in service as aforesaid.
- The trainee and the surety shall jointly and severally be liable to pay and refund forthwith to the Govt. On demand and without demur in cash all money expensed on the trainee/apprentice or on his account in respect of his training course as stated above and the decision of the govt. as to the amount so payable shall be final to either with interest on the said money calculated at the rate then in force for Govt. Loans.
- That if there is any dispute as to the effect or meaning of these presents or otherwise, however except as to matters for which specific provisions has been made in respect presents the same shall be referred to the sole arbitration of the Secretary to govt. of India in the Ministry of Railway or any person appointed by him whose decision shall be final and binding on the parties. The provisions of the Indian Arbitration Act 1040 as amended from time to time, shall apply.

IN WITNESS THERE OF the parties have set their hands on the day and year first mentioned above.

Signature of the Candidate

Signature of the Surety

WITNESS FOR THE TRAINEE/APPRENTICE TRAINEE/APPRENTICE

1. Signature _____

Signature: _____

Name & Address: _____

Name: _____

Pro: _____

Dated: _____

2. Signature _____

Name & Address: _____

WITNESS FOR SURETY

1. Signature_____

Name & Address: _____

2. Signature_____

Name & Address: _____

SURETY

Signature: _____

Designation: _____

Office: _____

Dated: _____

CERTIFICATE REGARDING PAY OF SURETY

This is to certify that the gross salary of Shri _____

Who is working as _____ in the office of _____

_____ and Basic Pay is Rs. _____ and Gross Salary is Rs. _____

P.F No. _____ Aadhar No. _____

Working Station _____

Signature: _____

Designation: _____

Date: _____

(SIGNED BY THE PAY DRAWING OFFICER)
(With seal of office)



CHARACTER CERTIFICATE
(For Group "C" Class-III service)

Certified that I know Sri/ Smt / Kumari _____

Son/Daughter/Widow of Sri/Smt _____

For the last _____ years _____ Months and that to the best of my knowledge and belief he/she bears reputable character and has no antecedents which render him/her unsuitable for Government employment.

Sri/Smt/Kumari _____ is not related to me.

Place:

Date:

Signature: _____

Name: _____

Designation: _____

(To be signed by the Head of Educational Institution last attended and similar certificate from employer, if any)

ATTESTED

Place

Date:

(SEAL)

Signature: _____

Name: _____

Designation: _____

(To be attested by the stipendiary 1st class Executive Magistrate/District Magistrate (Collector) /Sub. Divisional Magistrate (Dy Collector / RDO)



CHARACTER CERTIFICATE
(For Group "C" Class-III service)

Certified that I know Sri/ Smt / Kumari _____

Son/Daughter/Widow of Sri/Smt _____

For the last _____ years _____ Months and that to the best of my knowledge and belief he/she bears reputable character and has no antecedents which render him/her unsuitable for Government employment.

Sri/Smt/Kumari _____ is not related to me.

Signature: _____

Place:

Name: _____

Date:

Designation: _____



CHARACTER CERTIFICATE
(For Group "C" Class-III service)

Certified that I know Sri/ Smt / Kumari _____

Son/Daughter/Widow of Sri/Smt _____

For the last _____ year's _____ Months and that to the best of my knowledge and belief he/she bears reputable character and has no antecedents which render him/her unsuitable for Government employment.

Sri/Smt/Kumari _____ is not related to me.

Signature: _____

Place:

Name: _____

Date:

Designation: _____



DATE OF BIRTH CERTIFICATE

I have this day examined the original technical and academic certificates produced by Sri/Kum /Smt _____ S/o D/o Sri _____

The date of birth, technical and academic qualifications etc tallied as entered in the documents for appointment submitted by the candidate. The **date of birth** as entered in the documents

(SSC certificate)is _____ in words _____

Date:

Signature of the Officer
Designation of Officer
APO / SC

OATH OF ALLEGIANCE

I _____ S/o, D/o, W/o _____ swear solemnly and affirm that I will be faithful and bear true allegiance to India and to the Constitution of India as established by Law and that I will carry out the duties of my office loyally, honestly and with impartiality. So help me, God.

Attestation of the Officer

Signature of the Candidate:
NAME:

Signature
Divl. Personnel Officer / Asst Personnel Officer

MARRIAGE DECLARATION FORM

As per the Railway Board Lr.No. E/54/PR-1/2643, dated: 20.12.1954

I, Sri / Smt / Kum _____ S/o,D/o,W/o _____ declare as under

- i) That I am unmarried / a widower.
- ii) That I am married and have only one wife living.
- iii) That I am married and my husband has no other living wife to the best of my knowledge.
- iv) That I am married and have more than one wife living (Application for grant of exemption is enclosed)

I solemnly affirm that the above declaration is true and I understand that in the event of declaration being found to be incorrect after my appointment, I shall be liable to be dismissed from service.

Date:

Signature of the Candidate:
NAME :

IDENTITY CERTIFICATE
FOR APPOINTMENT IN RAILWAY SERVICES

Photograph to be
attested by Gazetted
Officer

- Name of the Candidate:
- Fathers/Husband's Name:
- Authority for appointment:
- Date of Birth:
- Physical Marks of identification: 1) _____
2) _____
- Whether belongs to SC/ST/OBC:
- Specimen signature or LTI:

Certified that the photograph affixed above is that

Sri/Smt/Miss _____

Who is selected for appointment to the railway Services as detailed above.

Signature:

Designation:

Office/ Stamp:

Note: To be signed by any Gazetted Officer

SOUTH CENTRAL RAILWAY



**Office of the
DRM / P /**

DECLARATION (FOR CG. CANDIDATES)

I _____ S/o,D/o, B/o, W/o _____
hereby declare as under:

I have been offered appointment for the post of _____ in Pay
Matrix **LEVEL** _____ of 7th CPC (GP Rs. _____) in _____ Department on _____
Division through Compassionate Grounds on Demise/Medical de - categorization/Medical
Unfit of my Father / Mother / Brother/ Spouse. In this connection, I declare the I will take
the responsibility of my family members who were dependents on my Father / Mother /
Brother / Spouse, and in case if it is proved subsequently that these family members have
been neglected and are not being properly maintained by me, I am liable for any action
taken by the administration, including termination of my services as per CPO/SC Serial
Circular No. 66/2002.

Date:

Station:

Signature of the Candidate

NAME:

Witness:

Signature :

Name :

Designation :

Station :



DECLARATION

I agree to the terms and conditions indicated in the offer of appointment issued under Letter No. _____ dated _____ Particularly the clause vide conditions Para VI for Group 'C', Para 15 for Group 'D' that I am liable to be posted / transferred anywhere in _____ Division. I am also aware that the nature of job expected by me involves shift / night duties.

Place:
Date:

SIGNATURE OF THE CANDIDATE



ANNEXURE

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWRD
CLASSES APPLYING FOR APPOINTMENT TO POSTS UNDER THE
GOVERNMENT OF INDIA.

This is to certify that Shri /Smt./ Kumari _____ son
/daughter of _____ of village / town
_____ in District /Division
_____ in the State /Union
Territory _____ belong to the
_____ community which is
recognized as a backward class under the Government of India, Ministry of Social
Justice and Empowerment's Resolution No. _____
dated _____. * Shri /Smt./Kumari _____ and
/or his /her family ordinarily reside[s] in the _____
District /Division of the _____ State /Union Territory.
This is also to certify that he /she does not belong to the persons /sections [Creamy
Layer] mentioned in Column 3 of the Schedule to the Government of India,
Department of Personnel & Training OM No. 36012/22/93 -Estt.[SCT] dated
8.9.1993**

DistrictMagistrate/ Deputy Commissioner etc.

Dated:

Seal

* The Authority issuing the certificate may have to mention the details of
Resolution of Government of India, in which the caste of the candidate is
mentioned as OBC.

** As amended from time to time.

Note:- The term 'Ordinarily' used here will have the same meaning as in Section
20 of the Representation of the People Act, 1950.

(Form of Certificate to be produced by a candidate belonging to a Scheduled Caste or Scheduled Tribe in support of his claim).

Form of Caste Certificate

This is to certify that Shri/Shrimathi/Kumari*
Son/Daughter of of village/town
in District/Division* of the State/Union
Territory* belongs to the
Caste/Tribe* which is recognized as a Scheduled Caste/Scheduled Tribe,
under--

*The Constitution (Scheduled Castes) Order, 1950.

*The Constitution (Scheduled Tribes) Order, 1950.

*The Constitution (Scheduled Castes) (Union Territories) Order, 1951.

*The Constitution (Scheduled Tribes) (Union Territories) Order, 1951.

[as amended by the Scheduled Castes and Scheduled Tribes Lists (Modification) Order, 1956, the Bombay Reorganisation Act, 1960, the Punjab Reorganization Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganization) Act, 1971 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976].

*The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956.

*The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959 as amended by the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976.

*The Constitution (Dadra and Nagar Haveli) Scheduled Castes Order, 1962.

*The Constitution (Dadra and Nagar Haveli) Scheduled Tribes Orders, 1962.

*The Constitution (Pondicherry) Scheduled Castes Order, 1964.

*The Constitution (Scheduled Tribes) (Uttar Pradesh) Order, 1967.

*The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968.

*The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968.

*The Constitution (Nagaland) Scheduled Tribes Order, 1970.

2. Shri/Shrimathi/Kumari* an/or*
his/her* family ordinarily reside(s) in village/town of
district/division of the State/Union Territory of

Place State/Union Territory. Signature

Designation
(with Seal of Office)

Date

*Please delete the words which are not applicable.

Note.—The term, "Ordinarily resides" used here will have the same meaning as in Section 20 of the Representation of the Peoples Act, 1950.

मुख्य कार्मिक अधिकारी का कार्यालय, द. म. रेलवे, सिकंदराबाद
OFFICE OF THE CHIEF PERSONNEL OFFICER,
SOUTH CENTRAL RAILWAY, SECUNDERABAD
प्रमाणिकरण फॉर्म ATTESTATION FORM

पद Post.: _____

चेतावनी (1) प्रमाणिकरण फॉर्म में मिथ्या सूचना देना या किसी तथ्य को दबाने से अनईता सिद्ध होगी और अभ्यर्थी को भी सरकारी नौकरी के लिए अयोग्य ठहराने की संभावना है।

WARNING :- The furnishing of false information or suppression of any factual information in the Attestation form would be a disqualification, and is likely to render the candidate unfit for employment under the Government.

यहां चूसा गया है -
 अद्यतन फोटो की हस्ताक्षरित पांच पोर्ट
 साइज (5 से. मी 7 से.मी. अनुपातः)
 की प्रति लगाएँ)
 Affix signed pass port size
 (5cm x 7cm. approx.) copy of
 recent photograph -
 where asked for

- (2) इस फॉर्म को भरकर भेजने के उपरान्त अगर कैद, अभिषेक या विचारित किये हुये हों, तो तत्संबंधी विवरण तुरंत संघ लोक सेवा आयोग को या रेल भर्ती बोर्ड को या उस अधिकारी को जिसे पहले प्रमाणिकरण फॉर्म भेजा गया हो क्यास्थिति सूचित किया जाय, ऐसा न किया जाय तो वह तथ्य दमन माना जाएगा।

If detained, convicted debarred, etc., subsequent to the completion and submission of this form, the details should be communicated immediately to the Union Public Service Commission or the Railway Recruitment Board or the authority to whom the Attestation Form has been sent earlier, as the case may be, failing which it will be deemed to be a "suppression of factual information."

- (3) अगर किसी व्यक्ति की सेवा के दौरान किसी भी समय यह बात प्रकट हो कि प्रमाणिकरण फॉर्म में कोई निम्न सूचना दी गयी है या कोई तथ्य दबाया गया है, तो उस व्यक्ति को सेवा से हटाया जा सकता है।

If the fact that false information has been furnished or that there has been suppression of any factual information in the attestation form comes to notice at any time during the service of person, his services would be liable to be terminated.

(1) पूरा नाम, उपनाम सहित, यदि कोई हो (साफ-साफ अक्षरों में) Name in full (in block capitals) with aliases, if any. (कृपया सूचित करें कि आपने किसी समय अपने नाम या कुल नाम में कोई अंश जोड़ा या उस से कोई अंश छोड़ा है). (Please indicate if you have added or dropped in any stage any part of your name or surname).	कुल नाम Surname	नाम Name
(2) वर्तमान पूरा पता (अर्थात् गांव, थाना और जिला या घर, संख्या, पक्की/सड़क/मार्ग और शहर). Present address in full (i.e., Village, Thana and District or House Number, Lane/Street/Road and Town).		
(3) (क) घर का पूरा पता (अर्थात् गांव, थाना और जिला या घर, की संख्या, गली/सड़क मार्ग / और शहर और जिले के मुख्यालय का नाम). (a) House address in full (i.e., Village, Thana and District or House Number Lane/Street/Road and Town and name of District Headquarters). (ख) पाकिस्तान का मौलिक निवासी हो तो उस देश में पता और भारत प्रवास की तारीख। (b) If originally a resident of Pakistan, the address in that country and the date of migration to Indian Union		

उन स्थानों के विवरण (आयासाधारणों के साथ) जहाँ आप सबसे से पहले पांच वर्षों में किसी एक समय पर लोक वर्ष से अधिक अवधि तक रह चुके हैं। अगर किसी विदेश में (पाकिस्तान को मिलाकर) आप रह चुके हों तो उन सभी स्थानों के विवरण दिये जाने चाहिए, जहाँ आप २१ वर्ष की आयु की प्राप्ति के बाद एक वर्ष से अधिक तक रह चुके हों।

Particulars of places (with periods of residences) where you have resided for more than one year at a time during the preceding five years. In case of stay abroad(including Pakistan) particulars of all places where you have resided for more than one year after attaining the age of 21 years, should be given.

कब से From	कब तक To	पूरा आवास-पता (अर्थात्, गांव, थाना और ज़िला या घर संख्या, गली/सड़क/मार्ग वा शहर) Residential address in full (i.e., Village, Thana and District or House Number, Lane/Street/Road and Town)	पिछले स्तंभ में दिये स्थानों के जिला मुख्यालय का नाम Name of the District Headquarters of the Place mentioned in the preceding column

	पूरा नाम, उपनामों सहित, यदि हो Name in full with aliases if any	राष्ट्रीयता (जन्म से और या अधिवास से) Nationality (by birth and/or by domicile)	जन्म स्थान Place of birth	पेशा (नौकरी में लगें हों तो, पदनाम एवं कार्यालय का पता दिया जाय) Occupation (if employed give designation and official address)	वर्तमान डाक पता (यदि भर गया हो तो अंतिम पता दिया जाय) Present Postal address (if dead, give last address)	घर का स्थायी पता Permanent Home address
5. (i) पिता Father ...						
(ii) माता Mother ...						
(iii) पत्नी / पति Wife / Husband ...						
(iv) भाई (नं.) (1) Brother (s) (ii) ... (iii) ... (iv) ... (v) ...						
(v) बहन (नं.) (2) Sister (ii) ... (iii) ... (iv) ...						

(क) यदि पुत्र और पुत्रियाँ विदेश में अध्ययन करते/करती हैं तो उनके विवरण दिये जाय :-

(a) Information to be furnished with regard to son(s) and/or daughter(s) in case they are studying/living in a Foreign Country:-

नाम Name	राष्ट्रियता (जन्म से और/या अधिवास से) Nationality (by birth and/or by domicile)	जन्म स्थान Place of birth	देश का नाम जहाँ पर अध्ययन करते / रहते हैं (पूरे पते के साथ) Country in which studying/living with full address	किस तारीख से पिछले स्तंभ में उल्लिखित देश में अध्ययन करते/करती हैं। Date from which studying/living in the country mentioned in previous column

(6) राष्ट्रीयता
Nationality

(7) (क) जन्म की तारीख (a) Date of Birth (ख) आयु (b) Present age (ग) मैट्रिक उर्तीग होने समय आयु (c) Age at Matriculation	(क) (a) (ख) (b) (ग) (c)
(8) (क) जन्म का स्थान, जिला और राज्य जहाँ पर वह स्थित है। (a) Place of Birth, District and State in which situated. (ख) आपका जिला व राज्य। (b) District and State in which you belong. (ग) पहले-पहले आपके पिता किस जिले और राज्य के थे। (c) District and State in which your Father originally belonged ?	(क) (a) (ख) (b) (ग) (c)
(9) (क) आपका धर्म (a) Your Religion (ख) क्या आप अनुसूचित जाति/जन जाति के हैं ? हाँ या नहीं का उत्तर दें, यदि उत्तर हाँ, हो तो उसका नाम लिखें। (b) Are you a member of a Scheduled Caste/Scheduled Tribe ? Answer "Yes" or "No" and if the answer is "Y" State the name thereof.	(क) (a) (ख) (b)

10. शैक्षिक अर्हताएं - 15 वर्ष की आयु से लेकर जिन-जिन स्कूलों, कालेजों में अध्ययन किया उनके नाम, तिथियों के साथ :-
Educational qualifications showing places of education with years in Schools and Colleges since 15th year of age:

स्कूल/कालेज का नाम और पूरा पता Name of School/College with full address	प्रवेश की तारीख Date of Entering	छोड़ने की तारीख Date of Leaving	उत्तीर्ण परीक्षण Examination Passed

11. (क) क्या आप केन्द्रीय सरकार या राज्य सरकार या अर्ध सरकार या सरकार कल्प निकाय, स्वायत्त निकाय या सरकारी उपक्रम, निजी फार्म संस्थापन के अधीन कर्मचारी हैं या किसी भी समय कर्मचारी रह चुके हैं ? यदि हां, तो आज तक की नियुक्तियों के विवरण, तिथियों के साथ, दिये जायें।
(a) Are you holding or have any time held an appointment under the Central or State Government or a Semi-Government or a Quasi-Government body, or an autonomous body, or a Public Undertaking, or a Private Firm or Institution ? If so, give full particulars with dates of employment up-to-date.

अवधि Period		पदनाम, वेतन और नियुक्ति का स्वरूप Designation, Emoluments and nature of employment	नियुक्ति का नाम और पता Full name and address of employer	पूर्व नियुक्ति को छोड़ने के कारण Reasons for leaving previous service
कब से From	कब तक To			

11. (ख) भारत सरकार, किसी राज्य सरकार/भारत सरकार या राज्य सरकार की या उनसे नियंत्रित संस्था/स्वायत्त निकाय/ विश्व विद्यालय/स्थानीय निकाय-इनमें से किसी के अधीन यदि पूर्व नियुक्ति हुई हो तो :-
यदि आपने केन्द्रीय सिविल सेवा (अस्थायी सेवा) नियम, 1965 के नियम 5, के अनुसार एक मास की नोटिस देकर, या भारतीय रेल स्थापना संहिता भाग I के नियम 149 या उसी प्रकार के किसी तंदुरुस्ती नियम के अनुसार निर्धारित अवधि को नोटिस देकर, सेवा छोड़ दी हो, तो क्या आपके विरुद्ध कोई अनुशासनिक कार्रवाई की गयी जो वह आपकी सेवा-समाप्ति के लिए नोटिस देते समय या आपकी सेवा-समाप्ति की तारीख के पहले किसी भी समय, किसी मामले में कंकया आपके आचरण पर स्पष्टीकरण मांगा गया था।
(b) If the previous employment was under the Government of India, a State Government an undertaking owned or controlled by the Government of India or a State Government/an autonomous body/ University / Local body:-
If you had left service on giving month's notice under 5 of the Central Civil Service (Temporary Service) Rules, 1965, a notice for the prescribed period under Rule 149 of the Indian Railway Establishment Code, Vol. -I, or any similar corresponding rules, were any disciplinary proceedings framed against you or had you been called upon to explain your conduct in any matter at the time you gave notice of termination or service, or at a subsequent date, before your services actually terminated ?

12.	(क) क्या आप किसी समय गिरफ्तार किये गये हैं ? (a) Have you ever been arrested ? (ख) क्या किसी समय आप अभियोजित हुए हैं ? (b) Have you ever been prosecuted ? (ग) क्या किसी समय आप पुलिस हवालात में रखे गये हैं ? (c) Have you ever been kept under detention ? (घ) क्या आप किसी समय प्रतिबन्धित किये गये हैं ? (d) Have you ever been bound down ? (च) क्या आप पर किसी न्यायालय द्वारा जुर्माना लगाया गया है ? (e) Have you ever been fined by a Court of Law ? (छ) क्या आप पर किसी न्यायालय द्वारा किसी समय किसी अपराध के लिए दंडित हुए हैं ? (f) Have you ever been convicted by a Court of Law for any offence ? (ज) क्या आपको किसी विश्वविद्यालय से या अन्य शैक्षणिक प्राधिकारी या संस्था ने कोई परीक्षा देने से बहिष्कृत किया है या निष्कासित किया है ? (g) Have you ever been debarred from any examination or rusticated by any University or any other educational authority/Institution ? (झ) क्या आपको किसी समय रेल भर्ती बोर्ड या लोक सेवा आयोग ने उनकी परीक्षा देने / उनके चुनाव में बैठने से रोका है / अनर्हत घोषित किया है ? (h) Have you ever been debarred/disqualified by any Railway, or Public Service Commission for any of its examinations/selections ? (ट) इस प्रमाणीकरण फार्म को भरते समय क्या किसी न्यायालय में आपके विरुद्ध कोई अभियोग चल रहा है ? (i) Is any case pending against you in any Court of Law at the time of filling up this Attestation Form ? (ठ) इस प्रमाणीकरण फार्म को भरते समय क्या किसी विश्व-विद्यालय या अन्य शैक्षणिक-प्राधिकारी / संस्था में आपके विरुद्ध कोई अभियोग चल रहा है ? (j) Is any case pending against you in any University or any other educational authority/institution at the time of filling up this Attestation Form ? (ड) यदि कोई सरकारी या अन्य प्रशिक्षण संस्थान से मुक्त/बहिष्कार/निकाल दिया गया ? (k) Whether discharged/expelled/withdrawn from any Training Institution under the Govt. or otherwise ?	हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No हां/नहीं Yes/No
12.	(ख) यदि उपर्युक्त प्रश्नों में किसी का उत्तर हां हो तो संबंधित मामले / गिरफ्तार / हवालात / जुर्माना / अभियोग / दंड / सजा आदि का पूरा विवरण दें, और /या, इस फार्म को भरते समय न्यायालय / विश्वविद्यालय / शैक्षणिक प्राधिकारी आदि में विचाराधीन पहले वाले मामले का स्वरूप दें । (b) If the answer to any of the above mentioned questions is "Yes", give full particulars of the case/arrest/detention/fine/conviction/sentence/punishment, etc., and/or the nature of the case pending in the Court/University / Educational Authority, etc., at the time of filling up this form.	
टिप्पणी:- (i) इस प्रमाणीकरण फार्म के शीर्ष में दी गयी चेतावनी पर भी कृपया ध्यान दें । (ii) प्रत्येक प्रश्न का उत्तर प्रसंगानुसार हां या नहीं को काटकर स्पष्ट रूप से दें । NOTE: (i) Please also see the "Warning" at the top of this Attestation Form. (ii) Specific answer to each of the questions should be given by striking out "Yes" or "No" as the case may be		
13.	आपके निवास-स्थान के आपसे परिचित दो प्रख्यात व्यक्तियों के या दो ऐसे व्यक्तियों के नाम जिनसे आपके बारे में पूछताछ की जा सके ।	(1)
13.	Names of two responsible persons of your locality and address or two references to whom you are known.	(2)
मैं प्रमाणित करता हूँ कि उपर्युक्त सूचना मेरी जानकारी और विश्वास के अनुसार सही एवं पूर्ण है। ऐसी किसी भी परिस्थिति से मैं अवगत नहीं हूँ जो मुझे सरकार के अधीन नियुक्त होने से असमर्थ ठहराया जा सके । I Certify that the foregoing information is correct and complete to the best of my knowledge and belief. I am not aware of any circumstances which might impair my fitness for employment under Government. अभ्यर्थी के हस्ताक्षर Signature of Candidate : _____ स्थान Place : _____ दिनांक Date : _____		

पहचान प्रमाण - पत्र IDENTITY CERTIFICATE

प्रमाण पत्र निम्नलिखितों में से किसी से भी होना चाहिए ।
Certificate to be signed by any of the following:

- (i) केन्द्र वा राज्य सरकार राजपत्रित अधिकारी ।
Gazetted Officer of Central or State Government.
- (ii) जिस चुनाव क्षेत्र में या उनके माँ - बाप / अभिभावक सामान्यता रहते हों, उस चुनाव क्षेत्र के संसदीय सदस्य या विधान सभा-सदस्य हों ।
Members of Parliament or State Legislature belonging to the constituency where the candidate or his parent is ordinarily resident.
- (iii) उप - मण्डलीय दण्डाधी / अधिकारी :-
Sub-Divisional Magistrates/Officers:-
- (iv) तहसीलदार या न्याय व प्राप्त उप-तहसीलदार जो दण्डित / अधिकारी के अधिकार प्राप्त हों ।
Tahsildars or Deputy Tahsildars authorised to exercise magisterial powers.
- (v) मान्यता प्राप्त स्कूल के, जहाँ पर अभ्यर्थी ने अन्त में अध्ययन किया प्रिंसिपल / प्रधान अध्यापक ।
Principal/Head Master of the recognised School/College where the candidate studied last.
- (vi) ब्लॉक विकास अधिकारी ।
Block Development Officers.
- (vii) पंचायत निरीक्षक ।
Panchayat Inspectors.

प्रमाणित किया जाता है कि _____

श्री / श्रीमती/ कुमारी _____ के /को पुत्र /पुत्री /
से / पिछले _____ वर्ष _____

मास से परिचित हूँ और मेरी पूरी जिनका विश्वास के अनुसार उसके द्वारा ऊपर दिये गये विवरण सही है ।

Certified that I have known Shri/Shrimathi/Kumari _____ Son/
Daughter of Shri _____ for the last _____ years _____ months
and that to the best of my knowledge and belief particulars furnished by him/her are correct.

हस्ताक्षर Signature : _____

स्थान Place: _____

दिनांक Date : _____

पदनाम या हैसियत एवं पता _____

Designation status _____

and address _____

(कार्यालय में भरे जाने के लिए To be filled by the Office)

(i) नियुक्ति अधिकारी के नाम, पदनाम और पूरा पता । Name designation and all address of the Appointment authority.	(i)
(ii) किस पद पर अभ्यर्थी को करने के लिए विचार किया जा रहा है । Post for which the candidate is being considered.	(ii)



NATIONAL PENSION SYSTEM (NPS) – SUBSCRIBER REGISTRATION FORM**Central Recordkeeping Agency (CRA) - NSDL e-Governance Infrastructure Limited**

Please select your category [Please tick(✓)]	Central Govt.	☐	State Govt.	☐
	Central Autonomous Body	☐	State Autonomous Body	☐
	All Citizen Model	☐	Corporate Sector	☐
	NPS Lite (GDS)	☐		

Affix
recent photograph of
3.5 cm × 2.5 cm size /
Passport size

To,
National Pension System Trust.
Dear Sir/Madam,
I hereby request that an NPS account be opened in my name as per the particulars given below:

* indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page)
KYC Number, Retirement Adviser Code and Spouse Name fields are not applicable for Government & NPS Lite Subscribers

KYC Number (if applicable)		Generated from Central KYC Registry
Retirement Adviser Code (If applicable)		

1. PERSONAL DETAILS: (Please refer to Sr. No.1 of the instructions)

Name of Applicant in full	Shri ☐ Smt. ☐ Kumari ☐
First Name*	
Middle Name	
Last Name	
Subscriber's Maiden Name (if any)	
Father's Name*	
(Refer Sr. No. 1 of instructions)	
Mother's Name*	
(Refer Sr. No. 1 of instructions)	
Father's name will be printed on PRAN card. In case, mother's name to be printed instead of father's name [Please tick (✓)]	☐
Date of Birth*	(Date of Birth should be supported by relevant documentary proof)
City of Birth*	
Country of Birth*	
Gender* [Please tick (✓)]	Male ☐ Female ☐ Others ☐ Nationality* Indian ☐
Marital Status*	Married ☐ Unmarried ☐ Others ☐
Spouse Name*	
(Refer Sr. No. 1 of instructions)	
Residential Status*	Indian

2. PROOF OF IDENTITY (PoI)* (Any one of the documents need to be provided along with the identification number)

Passport		Passport Expiry Date	
Voter ID Card		PAN Card	
Driving License		Driving License Expiry Date	
NREGA JOB Card			
Others		Name of the ID	
UID (Aadhaar)	☐	(UIDI [Aadhaar] number not required.)	

As per the amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2019, PAN or Form 60 is mandatory under NPS. If you do not have PAN at present, please ensure that these details are provided within six months of submission of this Subscriber Registration Form.

3. PROOF OF ADDRESS (PoA)*

[Please tick (✓), as applicable]
#Not more than 2 months old.
Please refer Sr. No. 2 of the instructions

Correspondence Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
Registered Lease/Sale agreement of residence/Municipal Tax Receipt
#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill

Permanent Address

Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
Registered Lease/Sale agreement of residence/Municipal Tax Receipt
#Latest Piped Gas/Water/Electricity/Telephone[Landline or postpaid mobile] Bill

4.1 CORRESPONDENCE ADDRESS DETAILS*

Address Type*	Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified ☐
Flat/Room/Door/Block no.	
Premises/Building/Village	
Road/Street/Lane	
Area/Locality/Taluk	
City/Town/District	
State/U.T.	

4.2 PERMANENT ADDRESS DETAILS*

☐ Tick (✓) in the box in case the address is same as above.

Address Type*	Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified ☐
Flat/Room/Door/Block no.	
Premises/Building/Village	
Road/Street/Lane	
Area/Locality/Taluk	
City/Town/District	
State/U.T.	

5. CONTACT DETAILS

Tel. (Off) (with STD code)	+																				Tel. (Res): (with STD code)	+																		
Mobile* (Mandatory)	+	9	1																		(Mobile Number is required for communication and to get SMS alerts)																			
Email ID																																								

6. OTHER DETAILS (Please refer to Sr no. 3 of the instructions)

- Occupation Details* [please tick(✓)]
- Private Sector ☐ Public Sector ☐ Government Sector ☐ Professional ☐
- Self Employed ☐ Homemaker ☐ Student ☐ Others (Please Specify)
- Income Range (per annum) Upto 1 lac ☐ 1 lac to 5 lac ☐ 5 lac to 10 lac ☐ 10 lac to 25 lac ☐ 25 lac and above ☐
- Educational Qualifications Below SSC ☐ SSC ☐ HSC ☐ Graduate ☐ Masters ☐ Professionals (CA, CS, CMA, etc.) ☐
- Please Tick If Applicable Politically exposed person ☐ Related to Politically exposed Person ☐ (Please refer instruction no.3)

7. SUBSCRIBER BANK DETAILS* (Please refer to Sr no. 4 of the instructions)

(All the bank details are mandatory except MICR Code.)

Account Type [please tick(✓)]	Savings A/c ☐	Current A/c ☐
Bank A/c Number		
Bank Name		
Branch Name		
Branch Address		PIN Code
	State/U.T.	C o u n t r y
Bank MICR Code	IFS Code	

8. SUBSCRIBERS NOMINATION DETAILS* (Please refer to Sr. No . 5 of the instructions)

Name of the Nominee (You can nominate up to a maximum of 3 nominees and if you desire so please fill in Annexure III (Additional Nomination Form) provided separately)

First Name	Middle Name	Last Name

Relationship with the Nominee	Date of Birth (In case of Minor)
	d d / m m / y y y y

Nominee's Guardian Details (in case of a minor)

First Name	Middle Name	Last Name

9. NPS OPTION DETAILS (Please tick (✓) as applicable)I would like to subscribe for Tier II Account also YES ☐ NO ☐ If Yes, please submit details in Annexure I.

(If you wish to activate Tier II account subsequently, you may submit separate application (Annexure S10) to the associated Nodal Office or to POP/POP-SP of your choice, The list of POP/POP-SPs rendering services under NPS and Annexure S10 is available on CRA website)

I would like my PRAN to be printed in Hindi YES ☐ NO ☐ If Yes, please submit details on Annexure II**10. PENSION FUND (PF) SELECTION AND INVESTMENT OPTION*** (Please refer to Sr no. 6 of the instructions)**(i) PENSION FUND SELECTION (Tier I) : Please read below conditions before opting for the choice of Pension Funds:**

- Government Sector:** The following Pension Funds (PFs) will act jointly as default PFs , if choice is not exercised by the government employee/subscriber
(a) LIC Pension Fund Limited (b) SBI Pension Funds Pvt. Limited (c) UTI Retirement Solutions Ltd.In case of Central Autonomous Bodies (CAB)/ State Government (SG)/State Autonomous Bodies (SAB) employees, selection made under this section will be ignored, if choice to employees is not notified by the respective State Govt/Ministry.
- All Citizen Model:** Subscribers under All Citizen model have the option to choose the available PFs as per their choice in the table below.
- Corporate Model:** Subscribers shall have the option to choose the available PFs as per the below table in consultation with their respective Employer.
- NPS Lite:** NPS Lite is a group choice model where subscriber has a choice of PF and investment option as available with Aggregator.

Name of the Pension Fund (Please select only one)	Please Tick (✓)	Default Choice of Pension Funds
LIC Pension Fund Limited	☐	Available in Government sector, if employee/subscriber does not exercise choice of PF
SBI Pension Funds Private Limited	☐	
UTI Retirement Solutions Limited	☐	
ICICI Prudential Pension Funds Management Company Limited	☐	
Kotak Mahindra Pension Fund Limited	☐	
HDFC Pension Management Company Limited	☐	
Birla Sunlife Pension Management Limited	☐	

* Selection of 01 Pension Fund is mandatory for All Citizen subscriber

(ii) INVESTMENT OPTION

(Please Tick (✓) in the box given below showing your investment option).

Active Choice ☐ Auto Choice ☐

Please note:

- In case you select Active Choice fill up section (iii) below and if you select Auto Choice fill up section (iv) below.
- In case you do not indicate any investment option, your funds will be invested in Auto Choice (LC 50).
- In case you have opted for Auto Choice and fill up section (iii) below relating to Asset Allocation, the Asset Allocation instructions will be ignored and investment will be made as per Auto Choice (LC 50).

(iii) ACTIVE CHOICE – ASSET ALLOCATION (to be filled up only in case you have selected 'Active Choice' the investment option)

Asset Class	E (Cannot exceed 75%)	C (Max up to 100%)	G (Max up to 100%)	A (Cannot exceed 5%)	Total	Asset class E-Equity and related instruments; Asset class C-Corporate debt and related instruments; Asset class G-Government Bonds and related instruments; Asset Class A-Alternative Investment Funds including instruments like CMBS, MBS, REITS, AIFs, InvIts etc.
Specify %					100%	
Choices in Govt sector	Not available		Available	Not available	In case of Government employee/subscriber the Active choice of Asset Allocation is restricted to Asset Class 'G' only	

Please note:

- Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
- From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided in Annexure A. The tapering off of equity allocation will be carried out as per the matrix on date of birth.
- The total allocation across E, C, G and A asset classes must be equal to 100%. In case, the allocation is left blank and/or does not equal 100%, the application shall be rejected.

(iv) AUTO CHOICE OPTION (to be filled up only in case you have selected the 'Auto Choice' investment option). In case, you do not indicate a choice of LC, your funds will be invested as per LC 50.

Life Cycle (LC) Funds	Please Tick (✓) Only One	Choices in Govt sector	Note: 1. LC 75- It is the Life cycle fund where the Cap to Equity investments is 75% of the total asset 2. LC 50- It is the Life cycle fund where the Cap to Equity investments is 50% of the total asset 3. LC 25- It is the Life cycle fund where the Cap to Equity investments is 25% of the total asset 4. Govt. employee can exercise Auto Choice of Asset Allocation for LC 25 & LC 50 only
LC 75		Not available	
LC 50		Available	
LC 25			

11. DECLARATION ON FATCA* (Foreign Account Tax Compliance Act) COMPLIANCE (Please refer to Sr no. 7 of the instructions):**Section I***US Person* Yes ☐ No ☐**Section II***

For the purposes of taxation, I am a resident in the following countries and my Tax Identification Number (TIN)/functional equivalent in each country is set out below or I have indicated that a TIN/functional equivalent is unavailable (kindly fill details of all countries of tax residence if more than one):

Particulars		Country (1)	Country (2)	Country (3)
Country/countries of tax residency				
Address in the jurisdiction for Tax Residence	Address Line 1			
	City/Town/Village			
	State			
	ZIP/Post Code			
Tax Identification Number (TIN)/Functional equivalent Number				
TIN/ Functional equivalent Number Issuing Country				
Validity of documentary evidence provided (Wherever applicable)		dd / mm / yyyy	dd / mm / yyyy	dd / mm / yyyy

"I certify that:

- It shall be my responsibility to educate myself and to comply at all times with all relevant laws relating to reporting under section 285BA of the Act read with the Rules 114F to 114H of the Income tax Rules, 1962 thereunder and the information provided in the Form is in accordance with the aforesaid rules,
- the information provided by me in the Form, its supporting Annexures as well as in the documentary evidence are, to the best of my knowledge and belief, true, correct and complete and that I have not withheld any material information that may affect the assessment/categorization of the account as a Reportable account or otherwise.
- I permit/authorise the NPS Trust to collect, store, communicate and process information relating to the Account and all transactions therein, by the NPS Trust and any of NPS intermediaries wherever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.
- I undertake the responsibility to declare and disclose within 30 days from the date of change, any changes that may take place in the information provided in the Form, its supporting Annexures as well as in the documentary evidence provided by me or if any certification becomes incorrect and to provide fresh self-certification along with documentary evidence,
- I also agree that in case of my failure to disclose any material fact known to me, now or in future, the NPS Trust may report to any regulator and/or any authority designated by the Government of India (GOI) /RBI/IRDA/PFRDA for the purpose or take any other action as may be deemed appropriate by the NPS Trust if the deficiency is not remedied by me within the stipulated period.
- I hereby accept and acknowledge that the NPS Trust shall have the right and authority to carry out investigations from the information available in public domain for confirming the information provided by me to the NPS Trust
- I also agree to furnish such information and/or documents as the NPS Trust may require from time to time on account of any change in law either in India or abroad in the subject matter herein.
- I shall indemnify NPS Trust for any loss that may arise to the NPS Trust on account of providing incorrect or incomplete information.

Date / / Place : Name of subscriber Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)

Declaration & Authorization by all subscribers

I further agree to be bound by the terms and conditions of provision of services by CRA, from time to time and any amendment thereof as approved by PFRDA, whether complete or partial without any new declaration being furnished by me. I shall be bound by the terms and conditions for the usage of I-PIN (to access CRA website and view details) & T-PIN.

I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering.

Place :

Signature/Thumb Impression* of Subscriber in black ink
(* LTI in case of male and RTI in case of females)

Applicable to Government Subscribers only

Date of Retirement

Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.

Group of Employee (Tick as applicable) Group A ☐ Group B ☐ Group C ☐ Group D ☐

[illegible]

It is certified that the details provided in this subscriber registration form by _____ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person (In the box above)	Rubber Stamp of the DDO (In the box above)	Signature of the Authorised person (In the box above)	Rubber Stamp of the DTO/PAO/CDDO/ DTA/PrAO (In the box above)
Designation of the Authorised Person		Designation of the Authorised Person	
Name of the DDO		Name of DTO/PAO/CDDO/DTA/PrAO	
Deptt/Ministry		Date	d d / m m / y y y y

Applicable to Corporate Subscribers only

Date of Retirement

d	d	/	m	m	/	y	y	y	y
---	---	---	---	---	---	---	---	---	---

[illegible]

Certified that the details provided in this subscriber registration form by _____ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Place	
-------	--

Signature of the Authorised person (In the box above)

Designation of the Authorised Person

Rubber Stamp of the Corporate (In the box above)

15. DECLARATION BY THE AGGREGATOR**Applicable to NPS Lite Subscribers****Authorisation by Aggregator's office (NL - AO)**

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me byafter (s)he has read the entries/ entries have been read over to her/him by me.

Signature of the Authorised person (In the box above)	Rubber Stamp of the Aggregator (In the box above)

Name of the Aggregator NPS Lite Account Office (NL-AO) Registration Number NPS Lite - Collection Centre (NL - CC) Registration Number Membership No. allotted by Aggregator (if any) Place Date / / **16. TO BE FILLED BY POP-SP**Receipt No. (17 digits) POP-SP Registration Number Document accepted for date of Birth Proof: Copy of PAN card submitted YES ☐ NO ☐KYC Compliance YES ☐ NO ☐Documents Received: (Originals Verified) Self Certified (Attested) True Copies Identity Verification : Done **Existing Customer:**

I/we hereby certify/confirm that Shri/Smt/Kum is an existing KYC verified customer The above applicant is having an operative Bank/ Demat/Folio/.....account (specify nature of the account) having account number/client ID.....maintained at.....branch/office. The KYC documents available with us for this customer/client matches the requirement for opening NPS account and are in compliance with PMLA Rules/We further confirm that the Savings Bank a/c of Sh/Smt/Kum is not a 'Basic Savings Bank Deposit Account (applicable in case of Bank PoP)

To be filled by POP-SP		Name:
		Designation: Place:
POP-SP Seal	Signature of Authorized Signatory	Date / /

[To be filled by CRA - Facilitation Centre (CRA-FC)]Received by CRA-FC Registration Number Received at Date / / Acknowledgement Number (by CRA-FC) PRAN Alloted **ACKNOWLEDGEMENT**Name of the Subscriber: Contribution Amount Remitted: ₹ Date of Receipt of Application and Contribution Amount: / /

Stamp and Signature of the Employer/PoP:

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

General Guidelines

- (a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word.
- (b) In case, you mention the KYC number submission of proof for the same is necessary.
- (c) Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back.
- (d) The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted.
- (e) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (f) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (g) The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office.

S. No	Item No.	Item Details	Instructions																																																																
1	1	Personal Details	i. This Form is applicable only for Resident Indians. There is a separate Form for Non Resident Indians & Overseas Citizen of India. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card.																																																																
		Spouse Name	If married, spouse name is mandatory.																																																																
		Father's Name	i. Father's name is mandatory. ii. If father's name has more than 30 digits, you may fill Annexure II for the same.																																																																
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		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.																																																																
2	2, 3 & 4	Identity, Correspondence & Permanent address details	<table border="1"> <thead> <tr> <th>S.No</th> <th>Proof of Identity (Copy of any one)</th> <th>S.No</th> <th>Proof of Address (Copy of any one)</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Passport issued by Government of India.</td> <td>1</td> <td>Passport issued by Government of India</td> </tr> <tr> <td>2</td> <td>Ration card with photograph.</td> <td>2</td> <td>Ration card with photograph and residential address</td> </tr> <tr> <td>3</td> <td>Bank Pass book or certificate with Photograph.</td> <td>3</td> <td>Bank Pass book or certificate with photograph and residential address</td> </tr> <tr> <td>4</td> <td>Certificate of the POP for an existing customer.</td> <td>4</td> <td>Certificate of the POP for an existing customer.</td> </tr> <tr> <td>5</td> <td>Voters Identity card with photograph and residential address.</td> <td>5</td> <td>Voters Identity card with photograph and residential address</td> </tr> <tr> <td>6</td> <td>Valid Driving license with photograph</td> <td>6</td> <td>Valid Driving license with photograph and residential address</td> </tr> <tr> <td>7</td> <td>Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> <td>7</td> <td>Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.</td> </tr> <tr> <td>8</td> <td>PAN Card issued by Income tax department</td> <td>8</td> <td>Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly</td> </tr> <tr> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India</td> <td>9</td> <td>Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address</td> </tr> <tr> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> <td>10</td> <td>Job cards issued by NREGA duly signed by an officer of the State Government</td> </tr> <tr> <td>11</td> <td>Identity card issued by Central/State government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.</td> <td>11</td> <td>The identity card/document with address or letter of allotment of accommodation issued by any of the following: Central/State Government and its Departments, Statutory/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Financial Institutions and listed companies for their employees. 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		(i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/her in the account opening form, the document may be accepted as a valid proof of both identity and address.																																																																	
		(ii) If the address indicated on the document submitted for identity proof differs from the current address mentioned in the account opening form, a separate proof of address should be obtained. All future communications will be sent to correspondence address. If correspondence & Permanent address are different, then proof for both have to be submitted.																																																																	
		(iii) The KYC documents may be submitted within a period of 30 days after generation of PRAN. (Only for Government Subscribers)																																																																	
3	6	Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.																																																																
4	7	Subscriber's Bank Details	For Tier I & Tier II account, bank details are mandatory and it should be supported by a documentary proof. Please attach a cancelled cheque containing Subscriber Name, Bank Name, Bank Account Number and IFS Code. If cheque is not available or cheque is not preprinted with Subscriber name, a copy of bank passbook or bank statement or bank certificate or letter from Bank mentioning Subscriber Name, Bank Name, Bank Account No. and IFS Code should be submitted.																																																																
5	8	Subscriber's Nomination Details	In case of more than one nominee, percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected.																																																																
6	10	Pension Fund (PF) Selection and Investment Option	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' and in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. In case a Government employee/subscribers does not exercise the choices of Pension Fund, their contributions will be allocated among 03 Pension Funds namely (i) LIC Pension Fund Limited (ii) SBI Pension Funds Pvt. Limited (iii) UTI Retirement Solutions Ltd.																																																																
7	11	Declaration by subscriber on FATCA Compliance	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India - Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA. - Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number) - If applicant residence for tax purpose in jurisdiction(s) within India, Permanent Account Number (PAN) to be provided as Tax Identification Number (TIN). - In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided																																																																
8	12	Declaration by Subscriber	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the designated officer of POP/POP-SP/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Impression in case of females.																																																																

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: <https://www.npscra.nsdl.co.in>
 Call: 022-4090 4242
 Address: Central Recordkeeping Agency (CRA)
 NSDL e-Governance Infrastructure Limited
 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,
 Lower Parel (W), Mumbai - 400013

Equity Allocation Matrix for Active Choice

Age (years)	Max. Equity Allocation
Upto 50	75%
51	72.50%
52	70%
53	67.50%
54	65%
55	62.50%
56	60%
57	57.50%
58	55%
59	52.50%
60 & above	50%

Please note:

1. Upto 50 years of age, the maximum permitted Equity Investment is 75% of the total asset allocation.
2. From 51 years and above, maximum permitted Equity Investment will be as per the equity allocation matrix provided above. The tapering off of equity allocation will be carried out as per the matrix on date of birth.

SOUTH CENTRAL RAILWAY
GUNTAKAL DIVISION

New Pension System

(Details to be furnished by the Railway Servant)

01. Name of Railway Servant :
02. Designation :
03. Name of Ministry, Department/
Organisation :
04. Scale of pay :
05. Date of Birth :
06. Date of joining Service :
07. P.F.No./P.Pan :
08. Admn. Unit / Bill Unit :
09. Pay :
10. Nominee for accumulations under the
Pension Account :

S.No.	Name of Nominee (s)	Age / Date of Birth	Percentage of Share Payable	Relationship with the Railway Servant

Signature of the Railway Servant.

MANDATE FORM

BY

EMPLOYEE FOR NEFT PAYMENTS

1. NAME OF THE PERSON:.....
2. ADDRESS:.....
.....
TELEPHONE NO :
CELL PHONE: E-mail:
3. P.A.N. NO. :
AADHAR NO :
4. PARTICULARS OF BANK ACCOUNT:
 - (i) BANK NAME:
 - (ii) BRANCH NAME & ADDRESS:
.....
 - (iii) BANK BRANCH TELEPHONE NO:.....
 - (iv) Account type(whether SB or Current):.....
 - (v) ACCOUNT NO:
 - (vi) BANK'S MICR CODE
 - (vii) BANK'S IFS CODE
5. DECLARATION OF THE PARTY :

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or Not Affected at all for reasons of incomplete and incorrect information, the User Institution i.e., S.C.RAILWAY will not be held responsible. I have understood the scheme and agree to discharge the responsibility for which I am liable as a participant under the scheme.

Date:

Signature of the Supplier/Party/Employee

N.B.: One cancelled Cheque/photocopy of the Cheque is to be enclosed.
[Where the cheque does not carry IFS Code an attestation from Bank attesting the IFS Code should be given.]

SIGNATURE OF BANK OFFICIAL
(Where required)