- 1. Name of the Government servant
- 2. Designation
- 3. Date of birth
- 4. Details of the members of family as on----:

S. No	Names of the members of family	Date of birth	Relationship with the officer	Marital status	Remarks	Dated signature of Head of Office
(1)	(2)	(3)	(4)	(5)	(6)	(7)
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2.	27		÷			
3.		:			-	
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9.					· · · · · · · · · · · · · · · · · · ·	
10.						

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

Signature of Government servant

### Place:

#### Date:

Note 1. – The original Form submitted by the Government. servant is to be retained. All additions/alterations are to be recorded in this Form under the signature of Head of Office in Col 7. No new Form will substitute the original Form. However, the retiring Government. servant should submit the details of family afresh along with Form 5.

Note 2. – The details of spouse, all children and parents (whether eligible for family pension or not) and disabled siblings (brothers and sisters) may be given.

Note 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.

Note 4. - Wife and husband shall include judicially separated wife and husband.

#### 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

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Name, date of birth	Relation-ship	Share	If nominee is	Name, DOB,	Share	Name, DOB	Contingency
(DOB) and address of	with	to be	minor, name,	relationship and	to be	and address of	on happening
the nominee	employee/	paid	DOB and	address of alternate	paid	person who	of which
	pensioner	to	address of	nominee in case the	to	may receive	nomination
	1	each	person who	nominee under	each	the amount if	shall become
		Cuch	may receive	Column (1)	00011	alternate	invalid
			the amount on	predeceases the		nominee in	invand
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			behalf of	employee/		Col. (5) is a	
		-	minor	pensioner		minor	
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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

m	ade by Shri/Smt./Kumari
D	esignation
0	ffice
	(Strike out which nomination is not received)
	Entry of receipt of nomination(s) has been made in pageVolumeof 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.