ANNEXURE-I

APPLICATION FORM ADMISSION TO THE HIMACHAL PRADESH UNIVERSITY CONTRIBUTORY PENSION SCHEME

(To be furnished in duplicate)

HPU CPS
Index Number
(To be filled in by the H.P. University)

1. Name of applicant : ..............................................................
2. Sex : ..............................................................................
3. Marital Status : 
   Male
   Married
   Female
   Unmarried

4. Official Designation : ..............................................................
5. Office to which attached : ..............................................................
6. Date of first entry into service : ..............................................................
7. Scale of Pay : ..............................................................................
8. Basic Pay : ..............................................................................
9. Date of Birth : ..............................................................................
10. Date of superannuation : ..............................................................
11. **Nomination:**

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<th>Sr. No.</th>
<th>Name of Nominee(s)</th>
<th>Age/Date of Birth</th>
<th>Percentage of Share Payable</th>
<th>Relationship with the University Servant</th>
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Station:

Date:  

Signature of Applicant

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

**CERTIFICATE TO BE FURNISHED BY THE HEAD OF THE OFFICE**

Certified that Shri/Smt/Kum……………………………………. is a regular employee and is eligible to join the Himachal Pradesh University Contributory Pension Scheme.

Station:

Date:  

Signature of the Head of Office Seal  
With full address/Office

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