

**FORM 1**

*[See Rule 53 (1)]*

**Nomination for Retirement Gratuity/Death Gratuity**

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

I, ....., hereby nominate the person/persons mentioned below who is / are member(s) of my family, and confer on him/then the right to receive, to the extent specified below, any gratuity the payment of which may be authorized by the central Government 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 update at my death:

Original nominee(s)				Alternate nominee(s)	
Names and address of nominee / nominees  (1)	Relationship with the Government Servant.  (2)	Age  (3)	Amount or share of gratuity payable To each  (4)	Name, Address, Relationship and age of person or persons, if any, to whom the right conferred on the nominee pre-deceasing the Government servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity  (5)	Amount or share of gratuity payable to each  (6)

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

Dated this..... day of..... 20 at.....

Witnesses to signature:

- 1.....
- 2.....

Signature of Government servant

(To be filled by the Head of office)

Nomination by .....  
 Designation .....  
 Office.....

Signature of Head of office  
 Date.....  
 Designation.....

**FORM 3**  
[See rule 54 (12)]  
Details of Family

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)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
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 NO.8**

**NOMINATION FOR BENEFITS UNDER THE CENTRAL GOVERNMENT  
EMPLOYEES' GROUP INSURANCE SCHEME, 1980**

(When the Government servant has a family and wishes to nominate one member or more than one member thereof)

I \_\_\_\_\_ hereby nominate the person(s) mentioned below, who is/are member(s) of my family, and confer on him/them the right to receive to the extent specified below any amount that may be sanctioned by the Central Government under the Central Government 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 and address of nominee / nominees	Relationship with Government servant	Age	Share of amount to be paid to each	Contingencies on the happening of which the nomination shall become invalid	Name, address and relationship of the person, if any, to whom the right of the nominee shall pass in the event of his predeceasing the Government servant
1	2	3	4	5	6

N.B.:- The Government servant should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Dated this \_\_\_\_\_ day of 20\_\_\_\_\_ at \_\_\_\_\_

Signature of two witnesses:

1.

2.

Signature of Government servant

-----

\* This column should be filled in so as to cover the whole amount that may be payable under the Insurance Scheme.

**HOME TOWN DECLARATION FORM**

**[OM No. 43/15/57-Estts. (A) dated 24-6-1958]**

I, \_\_\_\_\_ hereby declare that my home town is at the place as shown below for the purpose of availing my self of the Leave Travel Concession purpose.

<b>State</b>	<b>District</b>	<b>Town</b>	<b>Village</b>	<b>Nearest Railway station</b>

**Signature of the Government employee**

**Signature of Head of Office**

Date : .....

Designation : .....

Nomination by : .....

Designation : .....

Date of receipt of nomination : .....

I .....do swear/solemnly affirm that I will be faithful and bear true allegiance to India to the Constitution of India as by law established, that I will uphold the sovereignty of India, and that I will carry out the duties of my office loyally, honestly and with impartiality.

(So help me God)

The Government employee

The Government employee