

**Part II**

*(To be filled by the Establishment Branch)*

- (1) Name of the Institution : .....
- (2) Full Name of the Employee : .....
- (3) Pension Membership No. : .....
- (4) Date of Birth :
- (5) National Identity Card No. :
- (6) Date of 1<sup>st</sup> appointment to the **Permanent Post** in the University system:
- (7) Date of retirement/resignation :

*(Please attach a certified copy of the retirement letter issued by the Institution)*

- (8) Employee category : Academic  Non Academic/Academic Support
- (9) Post last held : .....
- (10) Department/Section : .....
- (11) (a) Last drawn salary point : .....
- (b) Last drawn allowances *(Only if they are applicable for Provident Fund and Pension Fund Contribution calculations in terms of UGC Circulars)*:

<u>Allowance</u>	<u>Amount</u>
I. ....	.....
II. ....	.....

(12) Name changes during the University service period (if any):  
.....

(13) Service Record (**Permanent Service only**)

(a)

<u>Higher Educational Institution</u>	<u>Service period (From – To)</u>	<u>Universities Pension Fund No.(if available)</u>
i. ....	.....	.....
ii. ....	.....	.....
iii. ....	.....	.....
iv. ....	.....	.....

*(Please attach a separate sheet if space is not sufficient)*

(b) If there were break of service, give details of such periods and reasons : .....

(c) No Pay/ interdiction particulars with dates (if any) :

	<u>Period</u>	<u>Reasons</u>
1.	.....	.....
2.	.....	.....
3.	.....	.....

(14) Details of dues to the Higher Educational Institution according to the Act. (If any)

- i. Description : .....
- ii. Amount : .....
- iii. Action taken/to be taken : .....

(15) i If the Refund papers were not submitted within two months from the cessation of employment, reasons for such Delay?

.....

ii Is the contributor responsible for the delay.....  
(State only Responsible / Not Responsible)

I certify that the above particulars are true and correct according to his personal file maintained in this office and that there is no disciplinary inquiry pending or contemplated against the applicant.

Prepared by :- Name ..... Signature .....

Checked by :- Name ..... Signature .....

Date: .....

.....  
Signature of the Deputy Registrar  
/Senior Assistant Registrar/ Senior Assistant Secretary

Name: .....  
(Official Seal to be affixed)

**Part III**

*(To be filled by the Finance Branch)*

1.
  - i. Current Pension Fund No. : .....
  - ii. Name : .....
  - iii. Date of Initial contribution made for pension scheme : .....
  - iv. Details of any change in the Pension Fund No.(if available) : .....
  
2.
  - i. Last drawn salary : .....  
*(Please attached a certified copy of the last salary slip)*
  - ii. Allowances paid for Last working month (only if applicable for contribution calculations in terms of UGC Circulars):  

COLA - ..... Other - .....
  - iii. Last Working Date : .....
  - iv. Arrears of salary paid along with last drawn salary (if any):.....  
*(A working sheet to be attached)*
  - v. Arrears of salary paid after payment of last month salary:.....  
*(A working sheet to be attached)*
  - vi. Last Working month Pension Contribution : .....
  - vii. Last Contribution amount sent as per monthly contribution list : .....
  - viii. Is there any differences between above (vi) & (vii), Please provide followings:  

(a) Amount : .....

(b) What actions taken / to be taken :.....
  - ix. Details of Dues to the Higher Educational Institution (Which couldn't recovered from the UPF Balance)  
.....  
.....
  
3.
  - i. Whether, contributions towards Universities Pension Fund were made continuously on account of this employee, except for the break of service or no-pay periods declared in the Part II item 13(c) of the application? Answer Yes **or** No. : .....
  - ii. If the answer is **no**, give details :  
.....

4. i. Whether, any part of the salary revision is not yet implemented to this employee?

Answer Yes **or** No : .....

ii. If the answer is yes, give the working sheet of arrears contribution calculated in this regard.

iii. Details of Remittance of arrears of contribution : Amount : .....

Date : .....

5. Details of dues to the Higher Educational Institution according to the Act. (If any)

i. Description : .....

ii. Amount : .....

iii. Action taken/to be taken : .....

Prepared by :- Name ..... Signature .....

Checked by :- Name ..... Signature .....

**I certify that particulars stated in Part III above are true and correct.**

Date: .....

Signature of the Bursar/Deputy Bursar/Senior  
Assistant Bursar/Accountant

Name: .....

(Official Seal to be affixed)

**Part IV**

*(To be completed by the Internal Audit Division)*

i. I have audited the application form in respect of .....  
and I certify that, according to his/her Personal File and Individual Pay Records the entire particulars given in the Part II and Part III of the application are true and correct. I have personally checked his/her Personal File and made an endorsement therein to the effect that the documents for Pension Payments are released.

ii. I confirm all the required certified copies of certificates, and documents are in order and annexed.

Birth Certificate  
 NIC Copy

Last Salary Slip  
 Resignation Acceptation Letter

Marriage Certificate  
 Bank Pass Book

.....  
Name of the Internal Auditor

.....  
Signature  
(Official Seal to be affixed)

Date : .....

**Part V**

**Secretary**

University Grants Commission

I recommend and forward the application submitted by .....  
..... to release the pension contribution.

.....  
Secretary/Registrar  
(Official Seal to be affixed)

Date : .....

*(You may forward the recommended application to the Assistant Accountant/Universities Pension Fund)*

