



जीवाजी विश्वविद्यालय, ग्वालियर (म०प्र०)

Jiwaji University, Gwalior (M.P.)

विद्या विहार, विश्वविद्यालय परिसर, ग्वालियर (म०प्र०) Email- registrar.jiwaji@gmail.com



आज़ादी का
अमृत महोत्सव

क्रमांक एफ/प्रशा./प्रस्था./2024/8740

दिनांक 29.08.2024

//अधिसूचना//

जीवाजी विश्वविद्यालय, ग्वालियर में दिनांक 01/01/2005 के पश्चात नियुक्त समस्त शिक्षक/अधिकारी/कर्मचारियों को मध्यप्रदेश शासन के नियमानुसार नवीन परिभाषित अंशदायी पेंशन योजना (NPS) अनिवार्यतः लागू की जाना है। इस संदर्भ में दिनांक 01/01/2005 के पश्चात नियुक्त समस्त शिक्षक/अधिकारी/कर्मचारियों को सूचित किया जाता है कि संलग्न National Pension System (NPS) – Subscriber Registration from को दिनांक 02/09/2024 तक अनिवार्य रूप से भरकर विभागाधिकारी/विभागाध्यक्ष के माध्यम से पूर्ण रूप से भरकर प्रशासन विभाग में जमा करना सुनिश्चित करें।

Subscriber Registration from निर्धारित समय सीमा में प्राप्त न होने की स्थिति में NPS के समस्त संबंधित लाभों से वंचित रहने की जिम्मेवारी संबंधित शासकीय सेवक की होगी।

नोट :- फार्म अंग्रेजी के कैपिटल अक्षरों में भरा जावे तथा आवेदन पत्र के साथ बैंक पासबुक की प्रति, आधार कार्ड, पैनकार्ड दो पासपोर्ट साईज फोटो आवश्यक रूप से संलग्न करें।

संलग्न :- Subscriber Registration from (NPS) की प्रति।

आदेशानुसार,


कुलसचिव

प्रतिलिपि :-

1. समस्त शिक्षक/अधिकारी/कर्मचारी, जी०वि०वि०, ग्वालियर (दिनांक 01/01/2005 के बाद नियुक्त)
2. समस्त विभागाध्यक्ष/विभागाधिकारी/समन्वयक/निदेशक जी०वि०वि०, ग्वालियर।
3. उप/सहा० कुलसचिव प्रशासन, जी०वि०वि०, ग्वालियर।
4. वित्त नियंत्रक/सहायक कुलसचिव लेखा की ओर आवश्यक कार्यवाही हेतु।
5. समस्त अध्यक्ष/सचिव विश्वविद्यालय शिक्षक/कर्मचारी संघ, जी०वि०वि०, ग्वा०।
6. कुलगुरु के सचिव, जी०वि०वि० ग्वालियर।
7. कुलसचिव के निजी सहायक, जी०वि०वि० ग्वालियर।

उप/सहायक कुलसचिव (प्रशासन)

NATIONAL PENSION SYSTEM (NPS) - SUBSCRIBER REGISTRATION FORM - Government Sector

Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Ltd.)

Print my PRAN in Hindi Yes No If yes, please submit details as per Annexure I

Select your category (Please tick (✓)) Central Government State Government Central Autonomous Body State Autonomous Body

Paste recent photograph of 3.5 cm × 2.5 cm size / passport size
(Do not sign across / staple / clip)

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 (Refer general guidelines at instructions page.) Use Annexure II if name exceeds the space provided below.

1. PERSONAL DETAILS: (Refer Sr. No. 1 of the instructions)

Salutation* Shri Smt. Kumari

Applicant Name*

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

Father's Name

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

Mother's Name

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

Either Father's or Mother's name is mandatory* **Select the name to appear on PRAN Card** Father's name Mother's Name

Date of Birth*

Place of Birth*

Country of Birth*

Gender* Male Female Transgender Nationality*

Marital Status* Unmarried Married Widow/Widower Divorcee

Spouse Name* (if married)

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

PAN*

 or Form 60 furnished Submission of PAN or Form 60 is mandatory

Annual Income Range (per annum)* Below 1 lac 1 lac to 5 lac 5 lac to 10 lac 10 lac to 25 lac 25 lac to 1 Cr Above 1 Cr

Please Tick if Applicable Politically exposed person Related to Politically exposed person (Please refer instruction no. 1)

2. PROOF OF IDENTITY (PoI): (If PAN is not provided, any one of the following documents to be submitted)

Passport	<table border="1" style="width: 100%; text-align: center;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																							Passport Expiry Date	<table border="1" style="width: 100%; text-align: center;"><tr><td>d</td><td>d</td><td>m</td><td>m</td><td>y</td><td>y</td><td>y</td><td>y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	d	d	m	m	y	y	y	y																																														
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Proof of possession of Aadhaar	<table border="1" style="width: 100%; text-align: center;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																																																							Provide last Four Digits. Redact or black-out first 8 digits of the Aadhaar number on submitted copy																																																							

3. CURRENT ADDRESS DETAILS: (To be attested by the Nodal Office)

Line 1

Line 2

District

Country

Village / City / State/U.T.

PIN Code

4. CONTACT DETAILS:

Mobile*

Telephone with STD code

Email ID*

5. BANK DETAILS: (Proof to be submitted - Refer Sr. No. 4 of the instructions)

Account Type Saving A/c Current A/c

Bank A/c Number

Bank Name

IFS Code

6. NOMINATION DETAILS: (Refer Sr. No. 5 of the instructions)

A. The nomination shall be in favour of one or more persons belonging to his/her family. For nominating more than one person, submit Annexure III

B. A fresh nomination shall be made by the subscriber on his/her marriage.

C. Before filling-up the details, please refer Nomination relationship matrix provided on instructions page.

Nominee Name

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

Relationship

Age

Date of Birth (In case of Minor)

d	d	/	m	m	/	y	y	y	y

Name of Guardian

F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T
F	I	R	S	T		M	I	D	D	L	E		L	A	S	T

(if nominee is a minor)

7. SELECTION OF PENSION FUND (PF) AND INVESTMENT CHOICE: (Refer Sr. No. 6 of the instructions)

1. Please Tick (✓) one Default option (3 pension Funds - SBI/UTI/LIC and default Govt. Scheme) I would like to choose my Pension Fund and investment choice (Please select below)

Pension Fund* (Please Tick (✓) one)		Investment Choice (Please Tick (✓) one)
<input type="checkbox"/> Aditya Birla Sunlife Pension Mgmt Ltd	<input type="checkbox"/> Axis Pension Fund Management Limited	<input type="checkbox"/> Active Choice (i.e. 100% in Govt Securities)
<input type="checkbox"/> DSP Pension Fund Managers Private Ltd	<input type="checkbox"/> HDFC Pension Mgmt Co Ltd	
<input type="checkbox"/> ICICI Prudential Pension Funds Mgmt Co Ltd	<input type="checkbox"/> Kotak Mahindra Pension Fund Ltd	
		Or

CENTRAL RECORDKEEPING AGENCY

PAO/CDDO REGISTRATION FORM

(To avoid mistake(s), please read the accompanying instructions carefully before filling up the form)
This form is to be used for the purpose of registration of Pay and Accounts Office (PAO) or Cheque Drawing and Disbursing Officer (CDDO) or equivalent entities in Central Civil Ministries / Railways/Post / Telecom / Civil Defence.

PAO/CDDO Registration Number :
(To be allotted by CRA)

We are pleased to inform you that our Pay and Accounts Office / Cheque Drawing and Disbursing Officer has decided to join the National Pension System. The details required for registration in the CRA system are provided below:

- 1. PAO/CDDO AIN (Optional): (Refer instruction no. 4)
- 2. Are you a Cheque Drawing DDO *: Yes No or PAO cum DDO: Yes No (Refer instruction no. 12)
- 3. PAO/CDDO Type*: Civil Postal Telecom Railways Defence
(Please Tick ✓)
- 4. Name of the PAO/CDDO Office*:
- 5. PAO/CDDO Address*:
 Flat/Unit No, Block no.*
 Name of Premise/Building/Village
 Area/Locality/Taluka
 District/Town/City*
 State / Union Territory*
 Country*
 Pin Code* Phone No.*:
 (STD code) (Phone No.)
- Alternate Phone Number:
- Fax Number:
- 6. Official Email ID*: (Refer instruction no.5)
- 7. Authorized contact person's Designation*:
- 8. Name of the Departments currently served by the PAO/CDDO*: (Refer instruction no.6)
 - i)
 - ii)
 - iii)
 - iv)

PAO/CDDO stamp & Signature of
Authorised signatory

