



NOMINATION FOR DEATH GRATUITY/ RETIREMENT GRATUITY
ENCASHMENT /GROUP INSURANCE SCHEME

I hereby nominate the persons mentioned below for:

A) DEATH GRATUITY/RETIREMENT GRATUITY

Sl. #	Full name of the Nominee	Date of Birth	Relationship	Address	Share (%)

B) LEAVE ENCASHMENT

Sl. #	Full name of the Nominee	Date of Birth	Relationship	Address	Share (%)

C) GROUP INSURANCE SCHEME

Sl. #	Full name of the Nominee	Date of Birth	Relationship	Address	Share (%)

Signature of two witnesses:

Witness I :
Date :
Name :
Designation :
Address :

Signature of employee

Date :
Name :
Designation :
Section :
Marital Status :

Witness II :
Date :
Name :
Designation :
Address :

The above nominations have been checked, accepted and kept in our records.

AO-I (Admin.) / AO-III (Admin.)

REGISTRAR