

FORM 2

Details of Family

Important

(1) The original Form submitted by the member of service or subscriber is to be retained. All additions or alterations are to be communicated by the member of Service or retired member of service or subscriber along with the supporting documents and the changes shall be recorded in this Form under the signature of Head of Office or District Treasury Officer or Treasury Officer or any other designated authority for the purpose in Column (7). No new Form will substitute the original Form. However, the retiring subscriber should submit the details of family afresh at the time of retirement.

(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.

(3) The Head of Office or District Treasury Officer or Treasury Officer or any other designated authority for the purpose 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.

(4) Wife and husband shall include judicially separated wife and husband.

(5) The retired member of service shall attach the details of change in family structure after retirement in the proforma prescribed under Dept. of P.& P.W., O.M No. 1 (23)-P.&P. W/91-E, dated the 4th November, 1992.

(6) Copies of birth certificates to be attached. Copies of any other relevant certificates, if available, should be attached.

Name of the member of service or subscriber		Designation, service and cadre		Nationality	
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Details of family members:

S.N.	Name (Please see notes below before filling)	Date of birth in DD/MM/YYYY format	Aadhaar No.* (optional)	Relationship with Government servant or retired member of	Marital status	Remarks	Dated signature of Head of Office or Designated Authority
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				service or subscriber			for the Purpose
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

I hereby undertake to keep the above particulars up to date by notifying to the Head of Office any addition or alteration.

E-mail (Optional): Place:

Mobile: Date:

Signature

**Providing Aadhaar No. is optional. However, if it is provided, consent to link it to Bank Account and also for authentication of identity from UIDAI, for pension related purpose only, is presumed.*

राष्ट्रीय पेंशन प्रणाली के तहत आने वाले अखिल भारतीय सेवा के अधिकारियों को सेवा के दौरान मृत्यु होने अथवा अशक्तता या विकलांगता के कारण सेवा से मुक्त होने कि स्थिति में पुरानी पेंशन योजना के अंतर्गत लाभ प्राप्त करने का विकल्प प्रदान करने के संबंध में।