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| **Government Aided**  **Educational, Institution** |

ANNEXURE – 1

**APPLICATION FOR ADMISSION TO**

**THE ANDHRA PRADESH CONTRIBUTORY PENSION SCHEME**

(G.O.Ms.No.655,Finance(Pension-1)Dept, dated,22-09-2004)

(To be furnished in Duplicate)

|  |  |
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| **CPS**  **Index Number** |  |

**(To be allowed by AG (A&E),AP)**

|  |  |  |
| --- | --- | --- |
| S.No | Details | Particulars |
| 1 | Name of the Applicant |  |
| 2 | Sex | Male / Female |
| 3 | Marital Status | Married / Unmarried |
| 4 | Official Designation |  |
| 5 | Office to which attached |  |
| 6 | Service to which the Applicant Belongs |  |
| 7 | Date of First entry into service |  |
| 8 | Whether appointed in Govt./Aided Educational Institute |  |
| 9 | Scale of Pay |  |
| 10 | Basic Pay |  |
| 11 | Date of Birth |  |
| 12 | Date of Superannuation |  |
| 13 | Whether appointment is regular or Under Rule 10(a)(I)  Of the General Rules for the A.P. State and Subordinate Services. |  |
| 14 | Whether recruited for Pensionable Service | Yes / No |
| 15 | Community of the Applicant | OC / BC / MBC / SC / ST |
| 16 | Details of Nomination |  |
|  | 1. Name of the Nominee |  |
|  | 1. Age |  |
|  | 1. Relationship |  |
| 17 | C.P.S Plan opted\*\* | Plan-1 / Plan-2 / Plan-3 |
| 18 | Remarks, if any |  |

Station :

Date :

SIGNATURE OF THE APPLICANT

( )

**CERTIFICATE TO BE FURNISHED BY THE HEAD OF THE OFFICE**

Certified that Sri/Smt/Kum.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is regular employee appointed to Pensionable service and is eligible to join the Andhra Pradesh Government **Contributory Pension Scheme**.

**SIGNATURE OF THE HEAD OF THE OFFICE**