

COIR BOARD

(gý_,bKwAma_Ü`_ CÚ__§mb`, ^maV gaH\$ma

Ministry of Micro, Small and Medium Enterprises, Govt. of India) If $\sim r \, Z_{\rm NP.B.}$ No. 1752, E_ Or and / M.G. Road, H\mufr/ Kochi-16

No.CB/Adm/2009/2/3 Date: 21.05.2009

CIRCULAR

As a part of service book updation, all employees/officers are requested to furnish the following:

- 1. Latest passport size photograph (Name should be written on the back side of the photograph)
- 2. Details of Family
- 3. Nomination for Family pension
- 4. Nomination for General Provident Fund
- 5. Nomination for Death Cum Retirement Gratuity
- 6. Details of service particulars
- 7. Change of residential address, if any.

The formats for filling up the details(2) to (6) are attached. The forms can be downloaded from our web site www.coirboard.gov.in (click the menu FORMS).

All are requested to furnish the required details to the undersigned at the earliest, but not later than 20.06.2009.

Sd/ **SECRETARY**.

To

- 1. All employees in Head Office
- 2. All Coir Bhavans/Sub Offices
- 3. Stock file.

The head of Coir Bhavans/Sub Offices are requested to collect the details in respect of their subordinates and forward to HO



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Ministry of Micro, Small and Medium Enterprises, Govt. of India) $Mr \sim 7 \text{ Z}/P.B.$ No. 1752, $E_0 \text{ Or an6} / M.G.$ Road, H Supr / I Kochi-16

FORM 3 See Rule 54 (12) DETAILS OF FAMILY

Name of the Government Servant :

Desi	gnation	:						
Date	of Birth	:						
Date	of appointment	:						
Deta	Details of the members of my family* as on is as follows:							
SI. No.	Name of the members of family*	Date of Birth	Relationship with the officer	Initials of the Head of Office	Remarks			
1	2	3	4	5	6			
1.								
2.								
3.								
4.								
5.								
I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office any addition of alteration.								
	Place:Signature of the Govt. servant							
	*Family for this purpose means family as defined in clause(b) of sub-							

NOTE: - Wife and husband shall include respectively judicially separated wife and husband.

rule(14) of Rule 54 of C.C.S (Pension) Rules 1972.



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FORM 4 See Rule 55(7)

NOMINATION FOR FAMILY PENSION, 1950

below, who are m Family Pension, 19 event of death after	embers of m 50 which ma	y family to re ly be granted	ceive by th	in the ord ne Central	er shown b Governme	elow the
Name & Address o	f nominee	Relationship		Age	Whether	married
		the Govt. ser	vant		or unmarr	<u>ied</u>
This nomina	tion supersed	les the nomina	tion m	nade by me	e earlier.	
NOTE: The Government last entry to		nt should drav ne insertion of				
last silling to	provent ti		any in		no nao oign	
Dated this	da	y of		2009 at		
Witness to signatu	re:	(Signature wi	th Nan	ne and Des	signation)	
1						
2						
		Signatu	ire of (Govt.serva	nt	
		Name a	and De	esignation		
	(To be	filled by the H	lead O	ffice)		
Nomination by			:	Signature (of Head of	Office
Designation				Dated		
Office				Designatio	n	



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FIRST SCHEDULE By-law 6(3)

Nomination Register Folio No.:	
SUBSCRIBER'S NOMINATION	
 When the subscriber has a family and wishes to nominate of 	one member
thereof.	
I hereby nominate the person mentioned below who is a me family as defined in By-law 2 of the Coir Board General Provident Fu 1977 to receive the amount that may stand to my credit in the Fund, of my death before that amount has become payable, or having becomes not been paid:	ind By-laws, in the event ome payable
1. Name and address of the nominee in the event of subscribers death :	
2. Relationship with the subscriber 3. Age	е
4 Name address, and relationship of person or persons, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the subscriber	
Dated this day of	
Signature of the subscriber	
Designation	
Address	
Signature of two witness with addresses: (1) (2) N.B: The subscriber should draw lines across the blank space below his I	ast entry to

Column 4 should be filled in as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

prevent insertion of any names after he has signed.

Subs	criber's Name	:	Shri./Sn	nt		
Depo	sitors Account No	:				
Nomi	nation Register Foli	o No.				
		SUBS	CRIBER'S	S NOMINATIO	<u>N</u>	
family laws, event payal	ber thereof: I hereby nominate y as defined in the 1977 to received the t of death, before	e the pe By-lawhe amount that and and and	ersons m w 2 of th ount that mount h d direct t	y and wishes to entioned below the Coir Board County may stand to note that as become pay that the said a	noming noming noming ny crec yable, mount	nate more than one are members of my Provident Fund Bylit in the Fund in the or having become shall be distributed heir names:-
	e and address of no t of the subscriber's		in the	Relationship with subscriber	Age	Amount of share of accumulation to be paid to each.
	1			2	3	4
	Cantinganaia	.				
5.	Contingencies on of which the no become invalid					
6.	Name, addrest relationship of the persons, if any, right of the nomine the event of his the subscriber	he per to wh ee shall	om the pass in			
Date	d this da	y of				
				Signature	of the	
subsc	criber					
				Designation	n	
				Address		
Signa (1) (2)	ature of two witness	es with	address			

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

Subs	criber's Name	: Shri./S	Smt			
Depositors Account No :						
Nomi	Nomination Register Folio No					
		SUBSCRIBER	R'S NOMINATION			
Ш	When the subscribe	er has no family	y and wishes to nominate one p	erson.		
receiv death	dent Fund By-laws, ve the amount that	1977, hereby may stand to	in the By-law 2 of the Coir of nominate the person mention my credit in the Fund in the payable, or having become pa	ned below to event of my		
Name	e and address of nor	minee	Relationship with subscriber	Age		
	1		2	3		
4.	**Contingencies on of which the non become invalid					
5.	Name, addresses and of the person or person whom the right of shall pass in the even deceasing the subscript.	sons, if any, to the nominee ent of his pre-				
Dated	d this day	of	2009 at			
			Signature of the subscriber			
			Designation			
			Address			
Signa (1)	ature of two witnesse	s with address	: :			
(2)						
(**) N	specify in thi	s column that	has no family makes a nomina the nomination shall become equiring a family.			

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

N.B.

Subscriber's Name : Shri./Smt Depositors Account No : Nomination Register Folio No						
SUBSCRIBER'S NOMINATION						
III When the subscriber has no family	y and wishes to	nominate	more than one			
person.						
I having no family as defined Provident Fund By-laws, 1977, hereby receive the amount that may stand to death before that not been paid and distributed among the said persons in the	nominate the my credit in th directed that	persons n ne Fund, ir the said	nentioned below to n the event of my amount shall be			
Name and address of nominees in	Relationship	Age	*Amount of			
the event of the subscriber's death	with		share of			
	subscriber		accumulation to			
			be paid to each			
1	2	3	4			
5. Contingencies on the happening of which the nomination shall become invalid						
6. Name, addresses and relationship of the person or persons, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the subscriber						
Dated this day of	2009	at				
	Signature of	of the subscrib	oer			
	Designation	n				
Address						
Signature of two witnesses with address:						
(1)						
(2)						
(**)NOTE:- Where as subscriber who has no fan	nily makes a nomin	ation, he shal	ll specify in this column			

(**)NOTE:- Where as subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

N.B.

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.



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 $(gy_L,bKwAm_L U^-CU__)mb^-$, ^maV gaH\$ma Ministry of Micro,Small and Medium Enterprises,Govt. of India) Nr ~r Z\$/P.B. No. 1752, E Or anb/ M.G. Road, H\$mfr/ Kochi-16

<u>FORM 1</u> See Rule 53(1)

NOMINATION FOR DEATH-CUM RETIREMNT GRATUITY

When the Government servant has a family and wishes to nominate one

member, or more than one member, thereof:
I, hereby nominate the person/persons mentioned below who is/are member(s) of my family.
I,

Original nominee Alternative nominee (s)							
		Alternative nomi	` ,				
Name(s) & address(es) of the nominee/nominees	Relationship with the Govt. Servant	Age	Amount of share of gratuity payable to each*	Name, address, relationship and age of the person or persons if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Government servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity	Amount share gratuity payable each**	or of to	
1	2	3	4	5	6		

- * This column should be filled in so as to cover the whole amount of the gratuity.
- ** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original nominee(s).

Strike out whichever is not applicable.

This nomination supersedes the nomination made by me earlier.

NOTE: The Government servant should draw lines across the blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this	Day of	2009 at
Witness to sign	gnature :	Name & Designation
1		
2		
		Signature of Govt. servant
		Name & Designation
	(To be fi	lled in by the Head Office)
Nomination b	y	. Signature of Head Office
Designation		Dated
Office		Designation



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DETAILS OF SERVICE PARTICULARS

1.	(in block letters) :	Shri./Smt./Kum.
2.	Present designation & Scale of pay	:
3.	Office/Section in which working:	
4.	Whether SC/ST/OBC/UR :	
5.	Date of Birth (as approved at the time of joining)	:
6.	Educational Qualifications (in chronological order with self attested copies)	:
7	Native place (as specified during appointment)	:
8	Permanent residential address with phone number	:
9.	Address for communication with phone number	:
10.	Date of joining the Board :	
11.	Past services, if any to counted for pension(with proof)	:
12.	Promotions acquired (with designation O.O.No. & date, ad-hoc/regular etc)	n, :
my kr	I hereby declare that the details furning	shed by me are correct to the best of
Date Place	: :	Signature: