

NAVODAYA VIDYALAYA SAMITI, REGIONAL OFFICE BHOPAL

Statement Of Particulars For Allotment Of NPS Employee Code Number To The Regular Employee Of The Samiti

Name of The Vidyalaya _____ Distt - _____ State - _____ Unit Code No - _____

S. No.	Name Of The Employee As Per Record [In CAPITAL Letters]	Name Of Subscribers Father / Husband [In CAPITAL Letters]	Sex	Date Of Birth [As Per Record]	Date Of Joining [As Per Appointment Letter]	Designation	Basic Pay	Monthly Rate of NPS Subscription	Month Which Subscription Commences	Employee Code No. Allotted By Samiti NPS Section
1	2	3	4	5	6	7	8	9	10	11
1										

Ref:- Regular Appointment Order No. _____ Dated _____ issued by the _____

Office letter no. _____ dated _____ forwarded alongwith Nomination form in **duplicate copy** to the NPS Cell for necessary action. Their name have not been included in the previous statement and they are not already member of any provident fund.

Certified that the above employee is eligible to subscribe to the NPS fund in accordance with the relevant Rule

Signature of Principal with Office Stamp

Signature of Account Officer / Section Officer

Encl :- 1. Date of Birth Certificate
2. Joining Letter issued by Vidyalaya