PONDICHERRY UNIVERSITY

(A Central University)
Bharat Ratna Dr B.R. Ambedkar Administrative Building,
R.Venkataraman Nagar, Kalapet, Puducherry - 605 014

Ref. No.PU/ESTT/NT8/2011-12/ VO6

Date: 06-06-2012

CIRCULAR

Sub: PU - Estt - Inspection of Service Book by the Regular Employees of the University - Reg.

-00000-

All the non-teaching staff of the University are hereby requested to kindly inspect their Service Books and to sign therein in token of having inspected the Service Book, as per the schedule attached herewith.

They are also requested to bring the declaration forms (format enclosed) duly filled in, when they come for inspection of the Service Book.

The employees are requested to make it convenient to come for inspection on the above said date and time without fail.

If any one desires to have a copy of the Service Book, may kindly make a payment of ₹500/-, by challan to the University Non-Plan Account.

(P. SUBRAMANIAN)
Deputy Registrar (Admn)

All Non-teaching staff Pondicherry University Puducherry 605 014 ... TPC

PONDICHERRY UNIVERSITY PUDUCHERRY

Unit	Designation	Dates for Inspection of S.B.
NT-10	Deputy Registrars & Assistant Registrars & above	27-06-2012 to 29-06-2012
	Section Officers / Private Secretaries	-do-
	Engineering / Electrical / Medical Officers & others	-do-
NT-9	Senior Assistant	18-06-2012 to 20-06-2012
	Personal Assistant	21-06-2012
NT-4	Junior Assistant	25-06-2012 to 27-06-2012
	Technical Staff – Electrical & Engineering Wing	28-06-2012
	Health Centre staff, Statistical Asst & Junior Field Asst & Sports staff	29-06-2012
NT-7	Professional Assistant, Semi-professional Assistant Library Assistant Lab Attendant & Record Attendant	18-06-2012 to 21-06-2012
NT-2	Assistant	25-06-2012
NT-6	Drivers	18-06-2012
NT-8	Stenographer	20-06-2012
	Senior Programming Assistant	20-06-2012
	Senior Technical Assistant [Computer]	21-06-2012
	Senior Technical Assistant [Computer/Network]	22-06-2012

Unit	Designation	Dates for Inspection of S.B.
NT-8	Technical Assistant [Computer/Network]	22-06-2012
	Computer Assistant	25-06-2012
	Data Entry Operator	26-06-2012
	Senior Technical Assistant [Science]	22-06-2012
	Technical Assistant [Science]	25-06-2012
72	Lab Assistant	26-06-2012
	Senior Lab Attendant	26-06-2012
	Coach	27-06-2012
	Technicians – CIF	27-06-2012
	Technicians – CMW	27-06-2012
	Technician – Chemistry	26-06-2012
	Sanitary Inspector	22-06-2012
	Instructor [Drama/Music]	22-06-2012
NT-5	Horticulture Attendant	26-06-2012 & 27-06-2012
	Catering Assistant Lab Attendant Catering Attendant Engineering Attendant Sanitary Attendant	28-06-2012 & 29-06-2012
NT-13	Office Attendant	18-06-2012 & 21-06-2012

ANNEXURE

(APPENDIX - I - Para 3 (ii))

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FORM - I.

When the subscriber has a family and wishes to nominate one number thereof.

I hereby nominate the person mentioned below, who is a member of my family as defined in Rule of the Pondicherry University General Provident Fund - Cum - Peonsion - Cum-Gratuity Rules stand to my credit in the Fund, in the event of my death before that amount has become payable, or having become payable, has not been paid:

Contingencies on the

happening of which

the nomination shall

become invalid

Name, address & relationship'if

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FORM - II.

When the subscriber has a family and wishes to nominate more than one member thereof

Contingencies

Name, address and

I hereby nominate the persons mentioned below, who are members of my family as defined in Rule of the Pondicherry University General Provident Fund-Cum-Pension-Cum-Gratuity Rules stand to my credit in the Fund, in the event of my death before that amount has become payable or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their names:

*Amount of

Relation

Age

Name and

addres of the nominee	-ship with subscriber	to be	e of ulation paid to ach	on the happening of which the nomination shall become invalid	relationship of the persons, if any to whom the right of the nominee shall pass in the event of the		
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FORM - III.

Details of Family

Name of the Employee :

Designation :

Date of Birth :

Date of appointment

Details of the *Family Members as on

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)

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

Pondicherry : Signature of the Employee.

Date

*Family - for this purpose means family as defined in Rule 58 of Pondicherry University GPF-Cum-Pension-Cum-Gratuity Rules.

Note :- wife and husband shall include respectively judicially separately wife and husband.

W. ..

FORM -IV.

When the subscriber has no family and wishes to nominate more than one person

Fund-Cum-Pension-Cum-Gratuity Rules of hereby nominate the persons

I have no family as defined in Rule of the Pondicherry University General Provident

direct that t against their	that amount ha he said amount s names:-	shall be di	stributed among	the said person	is in the	manner show	vn below
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FORM - V.

NAMINATION FOR DEATH-CUM-RETIREMENT GRATUITY:

When the employee has a family and wishes to nominate one member thereof.

receive on my death any gratuity		y death while in service ome admissible to me	
remain unpaid at my death.	CONTROL CONTROL CONTROL		
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Name and Relation ship Ag address of the with the nominee employee	on the happening of which the nomination shall become invalid	Name. address and relationship of the persons, if any, to whom the right Conferred on the nominee shall pass in the event of the nominee predeceasing the employee or the nominee dying	Amount of share of gratuity payable to each
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FORM - VI.

ADMISSION FOR GRATUITY

when the member of staff has a family and wishes to nominate more than one members thereof.

I, hereby nominate the persons mentioned below, who are members of my family and confer on them the right to the extent specified below, any gratuity that may be sanctioned by the Pondicherry University in the event of my death, while in service and the gratuity which having become admissible to me on retirement may remain unpaid at my death:

Name, address amount Name and Relation Amount or Contingencies Age and relationship of the on the happening addressess ship with or share of gratuity of which the person or amount or of nominees the share of gratuity payable to nomination shall employee become invalid payable to each each persons if any, to whom the right conferred on nominee predeceasing the employee or the nominee dying after the death of the employee but before receiving payment of the gratuity

This nomination supersedes the nomination made by me earlier on ______ which stands cancelled.

Dated this		da	y of _						
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Designation

Station :

Date :

COUNTERSIGNED

PONDICHERRY UNIVERSITY, PONDICHERRY.

DECLARATION

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FORM - II.

See Rule (12)

DETAILS OF FAMILY

Name of the Employee

Designation

Details of the members of

my family as on

SI. No.	Name of the Member of the family	Date of Birth	Relation ship with the officials	Initial of Head of office	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

I hereby undertake to keep the above particulars upto date by notifying to the office, any addition or alteration.

Signature of the Employee,

Date

DECLARATION

Certified that the following members of my family are dependent on me, for the purpose of Medical Attendance Rules:-

SI.	Name of the Members*	Relationship	Age	Income p. m. from
No.	*			all Sources
(1)	(2)	(3)	(4)	(5)

In case the parents are included as the members of family, the particulars of brothers and sisters alive may be furnished below:-

SI.	Name of the Member*	Relationship	Age	Income p. m. from
No.	The second secon			all sources
(1)	(2)	(3)	(4)	(5)

Station:

Date :

Signature of the Employee Full name in block letters Designation.

COUNTERSIGNED

* Definition of family. The term family for the purpose of the Central Service (Medical Attendance) Rules 1944 shall mean a Government Servant's wife or husband, wholly dependent upon the Government Servant.

Note: The condition of dependency both in the case of husband or the wife of the Government Servent has been dispensed with.

Explanation: (i) The term 'family' does not include any other dependent relations such as brother sister, widowed sister etc. The term Parents does not include 'Step-Parent'.

(ii) The term 'Children' will on include shildren adopted legally,

DECLARATION OF MEDICAL ATTENDANCE / LTC.

Pondicherry University hereby declare that the following family members for whom Medical Reimbursement/ Leave Travel Concession is claimed, are wholly dependent upon me and their individual income from all sources such as house, land, holdings, gross pension etc. does not exceed Rs. 500/- per mensem.

SI.	Name	Age &	Relationship
No.		Date of Birth	
(1)	 (2)	(3)	(4)

Signature of the Employee.

COUNTER SIGNATURE OF THE HEAD OF OFFICE.

Place :

Date :

DECLARATION OF MEDICAL ATTENDANCE / LTC.

Pondicherry University hereby declare that the following family members for whom Medical Reimbursement/ Leave Travel Concession is claimed, are wholly dependent upon me and their individual income from all sources such as house, land, holdings, gross pension etc. does not exceed Rs. 1500/- per mensem.

SI.	Name	Age &	Relationship
No.	· · · · · · · · · · · · · · · · · · ·	Date of Birth	
(1)	(2)	(3)	(4)

Signature of the Employee.

Name

Designation

COUNTER SIGNATURE OF THE HEAD OF OFFICE.

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