

New Form No. 11 – Declaration form
(To be retained by the employer for future reference)

EMPLOYEES PROVIDENT FUND ORGANISATION
Employees Provident Funds Scheme, 1952 (Paragraph 34 & 57) &
Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking by employment in any establishment on which EPF Scheme, 1952 and /or EPS 1995 is applicable)

1	Name of the member (Employee)		⇒ Name as per Aadhaar Card
2	Father's Name : Spouse's Name:		
3	Date of Birth: (DD/MM/YYYY)		⇒ All fields marked in "RED" should be filled it's a mandatory
4	Gender: (Male/Female/Transgender)		
5	Marital Status: (Married/Unmarried/Widow/Widower/Divorcee)		⇒ If you are experienced employee then mention as "Yes", If you are fresher then mention as 'No'
6	(a) Email ID: (b) Mobile Number:		
7	Whether Earlier a member of Employees' Provident Fund Scheme, 1952	YES / NO	
8	Whether Earlier a member of Employees' Pension Scheme, 1995	YES / NO	
9	Previous Employment Details:[if Yes to 7 AND OR 8 above]		
	(a) Universal Account Number:		
	(b) Previous PF account number:		
	(c) Date of Exit from previous employment: (DD/MM/YYYY)		
	(d) Scheme Certificate No. (if Issued)		
	(e) Pension Payment Order (PPO) No. (if Issued)		
10	(a) International Worker : (b) If Yes, State Country of Origin(India/Name of the Country) (c) Passport No. (d) Validity of Passport [(DD/MM/YYYY) to (DD/MM/YYYY)]		
11	KYC Details: (attach self-attested copies of following KYC's) (a) Bank account No. & IFSC Code (b) AADHAR Number (c) Permanent Account Number (PAN),		

UNDERTAKING

- 1) Certified that the particulars are true to the best of my knowledge. ☐
- 2) I authorize EPFO to use AADHAAR for verification/authentication/eKYC purpose for service delivery
- 3) Kindly transfer the funds and services details, if applicable, from the previous PF account as declared above to present PF account. (The transfer would be possible if the identified KYC detail approved by previous employer has been verified by present employer using Digital Signature Certificate)
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

(TICKONTHEBELOWOPTIONWHICHEVERIS APPLICABLE)

- ☐ I HAVE NOTWITHDRAWNTHEEPF & EPSACCUMULATED AMOUNTFROMMYPREVIOUSEMPLOYER(S)EPFACCOUNT, HENCEWOULD LIKETO TRANSFERTHESAMETO MYCURRENTEPFACCOUNT.
- ☐ I HAVEALREADYWITHDRAWNTHEEPF &EPSACCUMULATIONS FROMMYPREVIOUSEMPLOYER(S) EPF ACCOUNTNUMBER(S). I HEREBY DECLARETHAT THEABOVE MENTIONEDDETAILS ARETRUETO THE BESTOFMYKNOWLEDGE.
- ☐ NEVERCONTRIBUTED TOWARDSPROVIDENT FUND
- ☐ I HAVEALREADYAPPROCHEDTOMYPREVIOUSEMPLOYERFORPROVIDENT FUNDWITHDRAWAL

⇒ Please read the options & select the option which is suitable

Date: **Date Of Joining**

Place: **Joining Location (Bangalore/Hyderabad/Pune)**

Signature of Member

⇒ Your Signature is Mandatory

DECLARATION BY PRESENT EMPLOYER

- A. The Member Mr. /Ms. / Mrs. has joined on and has been allotted PF account number
- B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS Scheme, 1995:

- ☐ (Post allotment of UAN) The UAN for the member is
- ☐ Please Tick the Appropriate Option
The KYC details of the member in the UAN database

- ☐ HAVE NOTBEEN UPLOADED
- ☐ HAVEBEEN UPLOADED NOT APPROVED
- ☐ HAVEBEEN UPLOADED AND APPROVED WITH DSC

- C. In Case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:

- ☐ The above PF account number /UAN of the member as mentioned in (A) above has been tagged with his/her UAN/previous Member ID as declared by member.
- ☐ Please Tick the Appropriate Option

- ☐ The above member in the UAN database have been approved with Digital Signature Certificate and transfer request has been generated on portal
- ☐ As the DSC of establishment are not registered with EPFO, the member has been informed to file physical claim (Form 13) for transfer of funds from his previous establishment.

Date:

Signature of Employer with Seal of Establishment

EMPLOYEES PREVIOUS EMPLOYMENT DETAILS						
Emp. ID:						
Name of the Employee:						
Date of Joining:						

⇒ Your previous company employee ID, your name as per last company, DOJ to your last company

Sl. No.	Name of the Establishment previously worker (if any)	EPF A/c #	UAN # (12 digits)	Date of Joining (DD/MM/YY)	Date of Exit (DD/MM/YY)	PF account status (withdrawn or transferred)
1						
2						
3						
4						
5						

⇒ Please fill these Column & mention your previous PF Details