

Composite Declaration Form-11

(To be retained by the employer for future reference) EMPLOYEE'S PROVIDENT FUND ORGANISATION Employee's provident Funds scheme, 1952 (paragraph 34 & 57) &

Employee's Pension scheme, 1995 (paragraph 24)

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

1.	Name of the member						Siva	Sivani S S					
2.	Father's Name ✓ Spouse's Name □						Sara	Saravanan B					
3.	Date of Birth : (DD/MM/YYYY)						22/0	22/05/1998					
4.	Gender : (Male/Female/Transgender)							Fem	Female				
5.	Marital Status : (Married/Unmarried/Widow/Widower/Divorcee)							Unn	Unmarried				
6.	(a) Email ID :							redn	rednaz.inavis@gmail.com				
	(b) Mobile No:							7358	7358579242				
7.	Present employ Date of Joining			t(DD/MM/YYYY)			17/0	17/03/2022					
	KYC Details: (attach self attested copies of following KYCs)												
	a) Bank Account No:												
o	b) IFSC Codeof the branch:												
8	c) AADHAR Number								577151071223				
	d) Permanent Account Number(PAN),If available												
9.	Whether earlier a member of Employee's Provident Fund Scheme, 1952							Yes	Yes				
10.	Whether earlier a member of Employee's Pension Scheme, 1995						No	No					
	Previous employment details : [if Yes to 9 AND/OR 10 Above]-Un-exempted												
11.	Establishment Universal Name & Account Address Number		PF Account Number		Date of Joining (DD/MM/YYYY)		Date of		Scheme Certificate No.(if issued)		PPO Number (if issued)	Non Contributory Period (NCP)days	
	Previous employment details : [if Yes to 9 AND/OR 10 Above]-For Exempted Trus Member EPS Date of Joining								of Evit	Schama	Certificate	Non Contributory Period	
12.	Name & Address of the Trust		UAN	Account Number			•		Date of Exit (DD/MM/YYYY)		f issued)	(NCP)days	
	Tata Consultancy Services		101493086189	////		12/08	/2019	16/03	16/03/2022				
	a) International Worker								No				
	b) If Yes,state country of orgin (India/Name of other Country)												
	c) Passport No.												
	d) Validity of Passport [(DD/MM/YYYY) to (DD/MM/YYYY)]												
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UNDERTAKING

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification/authentication/e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details , if applicable, from the previous PF account as declared above to the present P.F. Account
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

	pate : Place :		Signature of Membe
	DECLARATION BY	Y PRESENT EMPL	OYER
A. PF 1	A. The member Mr./Ms./Mrs PF No and UAN	•	and has been alloted
В.			and EPS, 1995 :
	• Please Tick the Appropriate Option :		
	The KYC details of the above member in Have not been uploaded Have been uploaded but not approved Have been uploaded and approved with D		
C.	C. In case the person was earlier a member of EP	PF Scheme, 1952 and	EPS, 1995 :
	• Please Tick the Appropriate Option :		
	☐ The KYC details of the above member in sign/Digital Signature Certificate and transfer☐ The Previous Account of the member is no be initiated	r request has been ge	nerated on portal.
Date	Date:	Signature of 1	Employer with Seal of Establishmen