Separation Checklist - Mandatory

To be filled by associate

| Name: | KALYAN RAGHAVENDRA KUMAR SWAMY NELLI | | | | |
|--|--|--|--|--|--|
| Employee No: | 2183997 | | | | |
| Project HR: | SRIKANTH SURAMPUDI | | | | |
| Exit Interview completed (Y/N): | No | | | | |
| SEEPZ Pass / SEZ pass /ID card submission Location details & Date: | Deccan park LN2 & 26-12-2024 | | | | |
| Timesheet to be filled till last working date: | Yes | | | | |
| Any leave availed during the Notice Period: | No | | | | |
| Asset (laptop/desktop) submission Location details & | Decean park LN2 & 26-12-2024 | | | | |
| Date along with asset id | OIHW2066477 | | | | |
| All GESS Claims raised and approved (Y/N): | Yes | | | | |
| Any loans or Advance salary pending (if yes – loan name and pending amount): | No | | | | |
| Night Shift allowance rostered till Date of Release: | No | | | | |
| Personal | details for future correspondence | | | | |
| Contact no: | 8019286591 | | | | |
| Alternate contact no: | 9398599534 | | | | |
| Personal e-mail-id: | Kalyan 1999 n 2@ gmail. Com | | | | |
| Residential address (Permanent present): | Kalyan 1999 n 2@ gmail. Com 10-179/5/3 Sri Ram Nagar Colony, Lankelapalem, vishakhapatham, AP, 53101 | | | | |

Provident Fund Undertaking

Date: 27-12-2024

To

Tata Consultancy Services Ltd.

I the undersigned declare that I will

Transfer my Provident Fund (PF) accumulation / Pension to my new employer

(PI indicate Name of the New Establishment) within 3 months from my date of release and on completion of my full and final settlement.

I will withdraw my Provident Fund (PF) accumulation as permitted under the Employees' Provident Fund and Miscellaneous provisions Act, 1952 (EPF & MP Act).

I am also aware that I have to link my existing Universal Account Number (UAN) to my new employer, if I take up employment with any other organization.

Upon successful linkage of UAN to my new organization, I shall initiate a PF transfer request through TCS Alumni portal ticket (https://www.alumniportal.tcs.com) or directly on EPFO unified member portal. In the event that no PF transfer request is raised within 6 months from my date of release and on completion of my full and final settlement, I hereby authorize TCS to process my PF claim request basis PF withdrawal Form submitted by me.

I authorize TCS EPF Trust to process my PF settlement as above.

N. Kalyan. Signature

Name of Employee: NELLI KALYAN RAGHAVENDRA KUMAR SWAMY

Employee Number & Base Branch: 2183997 & CMC HYDERABAD

Contact/Mobile Number: 8019286591

Personal Email id: Kalyan 1999 n 2@ gmail. Com

TATA CONSULTANCY SERVICES EMPLOYEE'S PROVIDENT FUND APPLICATION FOR SETTLEMENT OF PROVIDENT FUND ACCOUNT (TO BE FILLED BY APPLICANT)

| The Trustees, TATA Consultancy Servi | ces Employees Pr | ovident Fund, | | | | | |
|---|--------------------------------------|---|---|-----------------------|------------------------|----------------|--|
| Dear Sir, | | | | | | | |
| As I have ceased to be a Fund account and pay t | an employee of T he said amount a | CS Limited with ef at an early date. | fect from | 27/12/24 , 1 re | quest you to settl | e my Provident | |
| 1. Name: NELLI KAL | YAN RAGHA | VENDRA KUM | AR SW | AMY | | | |
| 2. Father's / Husband's | Name: NELLI | MUSILINAIDU | | Address for Cor | respondence: | | |
| 3. Employee Number: 2183997 | | | D.No: 10-179/5/3 Sti Ram Nagar Codony, | | | | |
| 4. Date of Joining Service: 29-11-2021 | | | Lankelapalum, visakhapatuam, AP | | | | |
| 5. Date of Cessation of S | Service: 27-12 | -2024 | _5319 | * | | | |
| 6. Period of Service: 3.1 Years | | | Mobile No: 8019286591 | | | | |
| 7. PAN Card No: | | | Personal Email id: Kalyan 1999 n 2 agmail. Com. | | | | |
| 8. Aadhaar Number: 51 (*Self-attested Aadhaar Ca 9. Bank Account details: | | | | (| | 0 | |
| Name of Bank | | | | Account Type | IFSC Code | MICR | |
| ICIC | lankelagelem | lankelapalem 325,301510 | | Salary | 100003253 | 530229010 | |
| 10. Reason for leaving service / withdrawal of Provident Fund Accumulations: (Tigk any one appropriate option) a) Retirement b) Permanent migration from India c) Permanent & total Disablement d) Unemployment (More than 2 months) e) Getting Married (Only in case of Female members) | | | | | | | |
| previous employm | ent is transferred t | t to tax, if contributo to TCS PF a/c) is less adhaar & Pan is not | than five y | rears. | | | |
| (This declaration is a declare that I have not been of than 2 months immediately po | applicable if you have | rion of Non-EMPL re selected option (d) f tory/Establishment to f my application for w | from the abo | Act applies for a cor | itinuous period of not | tless | |
| ate: 26/12/2024 | | | N. Kalyan. Signature of Employee | | | | |
| certify that the particula | irs given above a | are true. | | | | | |
| | | | | N. Kalin | 210 | | |

Signature of Employee

To,



In case this card is lost / found, kindly inform / return to:
Income Tax PAN Services Unit, UTIITSL
Plot No. 3, Sector 11, CBD Belapur,
Navi Mumbai - 400 614.

इस कार्ड के खोने/पाने पर कृपया सूचित करें/लौटाएं: आयकर पैन सेवा यूनीट, UTIITSL प्लाट नं: ३, सेक्टर ११, सी.बी.डी.बेलापूर, नवी मुंबई-४०० ६१४.



భారత ప్రభుత్వం

Government of India





నేల్లి కళ్యాణ్ రాఘవేంద్ర కుమార్ స్వామి Nelli Kalyan Raghavendra Kumar Swamy పుట్టిన తేదీ/DOB: 08/08/1999 పురుషుడు/ MALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమె, పౌరసత్వం లేదా పుట్టిన తేదీ కి కాదు. ఇది ధృవీకరణతో మాత్రమే ఉపయోగించాలి (ఆస్ట్ ప్రమాణికరణ లేదా QR కోడ్ / ఆఫ్ట్ సైన్ XML యొక్క స్కానింగ్).

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

5145 6708 9567

ನ್ ಆಧ್ ರ. ನ್ ಗುರಿಂಬು



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

Unique Identification Authority of India



చిరునామా:

S/O నేల్లి ముసిలినడు, 1-131, కారణం వరి వీధి, పరవాడ క్షమండలం, లంకలాపాలెం, లంకెలపాలెం, లంకెలపాలెం,

విశాఖపట్నం,

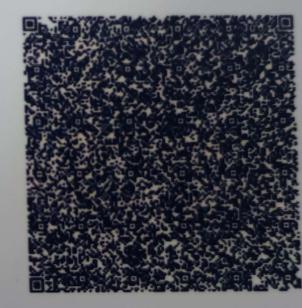
ఆంధ్ర ప్రదేశ్ - 531019

Address:

S/O Nelli Musilinaidu, 1-131, Karanam Vari Veedhi, Paravada Mandalam, Lankalapalem, Lankelapalem, PO: Lankelapalem, DIST:

Visakhapatnam,

Andhra Pradesh - 531019



5145 6708 9567

VID: 9103 6290 3749 1749

1047

help@uidai.gov.in

www.uidai.gov.i

