

Zeta Corporation Employee Provident Fund (EPF) Contribution Form

Section A: Personal Information

1. **Full Name:** _____
2. **Employee ID Number:** _____
3. **Date of Birth:** ____ / ____ / _____
4. **Gender:**
 - ☐ Male
 - ☐ Female
 - ☐ Other
5. **Contact Number:** _____
6. **Email Address:** _____

Section B: Address Details

1. **Permanent Address:**
 - ☐ Street: _____
 - ☐ City: _____
 - ☐ State: _____
 - ☐ Zip Code: _____
2. **Current Address:**
 - ☐ Street: _____
 - ☐ City: _____
 - ☐ State: _____
 - ☐ Zip Code: _____

Section C: Bank Details

1. **Bank Name:** _____
2. **Branch Name:** _____
3. **Bank Account Number:** _____
4. **IFSC Code:** _____
5. **PAN Number:** _____

Section D: Provident Fund Details

1. **EPF Account Number:** _____
2. **UAN (Universal Account Number):** _____
3. **Date of Joining:** ____ / ____ / _____

Section E: Contribution Details

1. **Contribution Amount:** _____
2. **Frequency of Contribution:**
 - Monthly
 - Quarterly
 - Annually

Section F: Declaration

I, the undersigned, hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that any false information may result in the rejection of this form.

Signature of the Employee: _____

Date: ____ / ____ / ____

HR Department Use Only

1. **Form Received By:** _____
2. **Date of Receipt:** ____ / ____ / ____
3. **Verified By:** _____
4. **Remarks (if any):** _____

Instructions:

1. Fill in all the fields with accurate information.
2. Attach a copy of your PAN card and bank passbook/statement.
3. Submit the completed form to the HR department.