TERADATA INDIA PRIVATE LIMITED

Note: <u>WHOM YOU CAN NOMINATE</u>

(A)   **UNDER THE EMPLOYEES' PROVIDENT FUND SCHEME**

(1)   A member of Employees' Provident Fund who is married and / or his father/ mother is/are dependent upon him can nominate only one or more persons belonging to his family as defined below:

   (a)   In the case of a male member, his wife, his children, his dependent parents and his deceased son's widow and children;

   (b)   In the case of a female member, her husband, her children, her dependent parents, her husband's dependent parents, her deceased son's widow and children.

(2)   If the member has got no family, or is a bachelor nomination may be in favour of any person or persons, whether related to him or not even to an institution. If the member subsequently acquires a family, such nomination shall forthwith become invalid and the member should make a fresh nomination in favour of one or more persons belonging to his family.

(B)   **UNDER THE FAMILY PENSION SCHEME:**

On the death of a member of the Family Pension Scheme, his family will be entitled to the benefits under the Family Pension Scheme. The family is defined as under:-

   (a)   wife in the case of a male member;

   (b)   husband in the case of a female member; and

   (c)   minor sons and unmarried daughters.

   Explanation: The expression "sons" and "daughters" shall include children adopted legally before death in service.

if the member has got no family, the monthly family pension, on the death of the member, will not be paid. However, Life Assurance Benefit will be paid to the person or persons entitled to receive his provident fund accumulations.

TERADATA INDIA PRIVATE LIMITED

Employee ID 30300137385

NOMINATION AND DECLARATION FORM
FOR UNEXEMPTED / EXEMPTED ESABLISHMENTS

Declaration and Nomination form under the Employees' Provident Fund

(Paragraph 33 and 61(1) of the Employees' Provident Fund Scheme, 1952 and Paragraph 13 of the Employees' Family Pension Scheme, 71)

1.	Name (in block letters) :	PRATIKSHA MISHRA
2.	Father's / Husband's Name:	SATYENDRA MISHRA
3.	Date of Birth :	25/12/1995
4.	Employee ID :	30300137385
5.	Date of Joining :	03/02/2021
6.	Marital Status :	Unmarried

7.   Permanent Address

Qno 7B,Street -16 Sector- 7 Bhilai ,

Durg , Chhattisgarh 490006

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_____

PART - A (EPF)

I hereby nominate the person(s) / cancel the nomination made by me previously and nominate the person(s), mentioned below to receive the amount standing to my credit in the Employees' Provident Fund in the event of my death:

Name & Address of the nominee(s)	Nominee's relationship with the member	Date of birth & Age of nominee(s)	Total amount of share of accumulations in Provident Fund to be paid to each nominee	If the nominee is a minor, name and address of the guardian who may receive the amount during the minority of nominee
(1)	(3)	(4)	(5)	(6)
Satyendra Mishra Qno 7B,Street -16 Sector- 7 Bhilai , Durg , Chhattisgarh 490006	Father	28/08/1972 49 age	50%	
Sadhna Mishra Qno 7B,Street -16 Sector- 7 Bhilai , Durg , Chhattisgarh 490006	Mother	30/06/1972 49 age	50%	

*Certified that I have no family as defined in para 2(g) of the Employees' Provident Fund Scheme, 1952 and should I acquire a family hereafter the above nomination should be deemed as cancelled.

*Certified that my father / mother is /are dependant upon me.

*Strike out whichever is not applicable.

pratiksha

Signature / or thump impression of the subscriber

TERADATA INDIA PRIVATE LIMITED

Employee ID 30300137385

PART - 5 (EPF)

I hereby furnish below particulars of the members of my family, who would be eligible to receive Family Pension & Life Assurance benefits in the event of my premature death in service.

Name & Address of the Nominee	Date of birth & Age of the Nominee	Relationship with the member
Satyendra Mishra	28/08/1972	Father
Sadhna Mishra	30/06/1972	Mother

*Certified that I have no family as defined in para 2(b) of the Employees' Family Pension Scheme, 1971 and should I acquire a family hereafter I shall furnish particulars thereon in the above form.

Date: 02/02/2022

pratiksha

*Strike out whichever is not applicable

Signature or thumb impression of subscriber.

_____

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed / thumb impressed before me by Shri/Smt./Kum. _____ employed in my establishment after he/she has read the entries/the entries have been read over to him/her by me and got confirmed by him/her

Signature of the employer or other authorized
Officer of the establishment

Place: _____

Date: _____

Designation:
Name and address of the Factory/establishment
or rubber stamp thereof.

TERADATA INDIA PRIVATE LIMITED

Employee ID 30300137385

EPS NOMINATION FORM - FORM 2

1.	Name (in block letters)	:	PRATIKSHA MISHRA	
2.	Father's / Husband's Name:		SATYENDRA MISHRA	
3.	Date of Birth	:	25/12/1995	
4.	Employee ID	:	30300137385	
5.	Date of Joining	:	03/02/2021	
6.	Marital Status	:	Unmarried	

7. Permanent Address

Qno 7B,Street -16 Sector- 7 Bhilai ,

Durg , Chhattisgarh 490006

_____

_____

Part B (EPS) (Para 18)

I hereby furnish below particulars of the members of my family who would be eligible to receive widow/children pension in the event of my death.

Sl. No.	Name of the	Address	Date of Birth	Relationship with the member
1	Satyendra Mishra	Qno 7B,Street -16 Sector- 7 Bhilai , Durg , Chhattisgarh 490006	28/08/1972	Father
2	Sadhna Mishra	Qno 7B,Street -16 Sector- 7 Bhilai , Durg , Chhattisgarh 490006	30/06/1972	Mother

** Certified that I have no family, as defined in para 2(vii) of Employees' Pension Scheme, 1995 and should I acquire a family hereafter I shall furnish particulars thereon in the above form.

I hereby nominate the following person for receiving the monthly widow pension (admissible under para 16 2(a)(i) and (ii) in the event of my death without leaving any eligible family member for receiving Pension.

Sl. No.	Name and Address of the Nominee	Date of Birth	Relationship with the member
1	Satyendra Mishra	28/08/1972	Father
2	Sadhna Mishra	30/06/1972	Mother

Date   : 02/02/2022
Place : Bhilai

pratiksha

**Signature or thumb impression
of the subscriber**

**Strike out whichever is not applicable.

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed/thumb impressed before me by
Shri/Smt./Kum._____ employed in my establishment after he/she has read the entries/entries have been read over to him/her by me and got confirmed by him/her.

Place: _____

**Signature of the employer or other
Authorized Officers of the Establishment**

Designation

**Name & Address of the Factory/
Establishment or Rubber Stamp Thereon**