

<b>FORM-II</b> <b>[Vide Rule 21]</b> <b>TATA COMMUNICATIONS</b> <b>EMPLOYEES' PROVIDENT FUND TRUST</b> <b>PROVIDENT FUND NOMINATION FORM</b>				
<b>SN</b>	<b>Particulars</b>	<b>Description</b>		
1	Name of the Employee (As per records in Capital Letter)			
2	Employee Code			
3	PF Membership Number (Mention your Employee Code )			
4	Designation			
5	Department			
6	Contact Number			
7	Location			
8	Region			
9	Date of Joining the Tata Communications Limited (dd-mmm-			
10	Gender (Male /Female)			
11	Father's Name			
12	Husband's Name (For married Women only)			
13	Date of Birth (dd-mmm-yy)			
14	Local Address for Correspondence with PIN Code			

  

<b>DETAILS OF NOMINEE OR NOMINEES DECLARED BY THE MEMBER</b>				
SN	Name of the Nominee/s	Nominee's relationship with the Member	Nominee/s Date of Birth	Percentage Share of accumulated fund to be paid
1				
2				
3				

  

<b>DETAILS OF GUARDIANSHIP IN CASE OF NOMINEE IS MINOR OF ABOVE NOMINEES</b>				
SN	Name of the Guardian/s	Guardian/s relationship with the member	Guardian/s Date of Birth	Remarks
1				
2				

**Declaration:**

1. I hereby nominate the above mentioned person/s to receive the amount that may stand to my credit in the fund, in the event of my death before that amount has become payable, or having become payable, has not been paid, and direct that the said amount shall be distributed among the said person/s in the manner shown above against their name/s.

2. I hereby also direct that in the event of my death during the minority of my above named nominee, the person whose particulars are given above shall be deemed to be the guardian of the minor nominee for the purposes of the funds.

3. I hereby declare that I have read TATA Communications Provident Fund Rules and that I agree to be bound by them and any subsequent addition to and alteration in the same as may from time to time hereafter be made in pursuance of the said Rules.

\_\_\_\_\_  
Signature of the Employee

Name

Date

**Witnesses:**

**1**

Signature \_\_\_\_\_

Name \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

**2**

Signature \_\_\_\_\_

Name \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

**Verified By Concerned HR**

Signature \_\_\_\_\_

Name \_\_\_\_\_

**Date** \_\_\_\_\_

**Region** \_\_\_\_\_

**Important Note:** All fields in the form are mandatory. No cell should be left blank. Please ensure that this form should be sent to PF Section.

**Nomination guidelines:****Who can and who cannot be nominated:**

**In case of Male Member:-** His wife, his children, his dependent parents, his deceased son's widow and her children.

**In case of Female Member:-** Her husband, her children, her dependent parents, her husband's dependent parents, her deceased son's widow and her children.

**Who cannot be nominated:** Who is not a member of the family. Brother is not a member of family.

**In case he/she has no family:** He/she can nominate any one. If member subsequently acquires family, such nomination forthwith become invalid and member should make a fresh nomination in favour of his/her family members.