

**FORM 'F'**

See sub rule(1) of Rule 6

**Gratuity Nomination Form****To****TATA Consultancy Services Ltd.****9th Floor, Nirmal Building,****Nariman Point, Mumbai - 400021.**

I, **Mr. Ram Prakash Singh** whose particulars are given in the statement below, hereby nominate the person(s) mentioned below to receive the gratuity payable after my death as also the gratuity standing to my credit 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 of gratuity shall be paid in proportion indicated against the name(s) of the nominee(s).

1. I hereby certify that the person(s) nominated is/are a member(s) of my family within the meaning of clause (h) of Section 2 of the Payment of Gratuity Act, 1972. - **Yes**

2. I hereby declare that I have no family within the meaning of clause (h) of Section 2 of the said Act. - **No**

3.(a) My father is not dependent on me. - **No**

(b) My mother is not dependent on me. - **Yes**

(c) My spouse's father is not dependent on my spouse. - **No**

(d) My spouse's mother is not dependent on my spouse. - **No**

4. I have excluded my husband from my family by a notice dated the \_\_\_\_\_ to the controlling authority in terms of the provision to clause (h) of Section 2 of the said Act. - **No**

5. Nomination made herein invalidates my previous nomination. - **Yes**

**Nominee(s)**

<b>Sr. No</b>	<b>Name in full with full Address of Nominee(s)</b>	<b>Relationship with the Employee</b>	<b>Date Of Birth</b>	<b>Proportion by which Gratuity will be shared</b>	<b>Name , Relationship and Address of Guardian if Nominee is minor</b>
1	Ms. Madhu Singh A77 2nd floor A block pandav nagar, White Building, Delhi, East Delhi, Delhi, India - 110092	Spouse	14/07/1993	100	

### Statement

**Full Name:** Mr. Ram Prakash Singh      **Employee Number:**

**Sex:** Male      **Date of joining:** 2024-10-16 00:00:00

**Marital Status:** Married      **Department:** Computer Consultancy

**Religion:** Hindu

**Permanent Address:** C/O: Lallu Singh, 13/3/12, Ramkot asharfi bhawan chauraha Ayodhya Faizabad, Ayodhya, Uttar Pradesh, India - 224123

**Date:**

**Place:**

**Signature of the Employee**

### Declaration by Witnesses

Nomination signed before me

Sr.No	Name in full with full address of Witnesses	Date:
1		
2		

**Date:**

**Place:**

### Certificate by the Employer

Certified that the particulars of the above nominations have been verified and recorded in this establishment

**Office Seal**

**Signature of the Employer/Trustee**

### Acknowledgement by the Employee

Received the duplicate copy of nomination in Form 'F' filed by me and duly certified by the employer.

**Date:**

**Signature of the Employee**