Form No 1

[See Rule 5 (2)]

FORM OF APPLICATION FOR ADMISSION TO THE KERALA MUNICIPAL PENSIONABLE EMPLOYEES' CENTRAL PROVIDENT FUND (TO BE SUBMITTED IN DUPLICATE)

Name of Applicant	Official Designation	Office to which attached	Service to which the applicant belongs	Whether the applicant is permanent or temporary. If temporary give the date of commencem ent of service	Rate of emolum ents per mensum	Rate of subscr iption per mensu m	If subscriber to any other fund, the name of such fund	Whether the applican t has a family or not	Account No. to be allotted by the Director of Urban Affairs	Remarks
1	2	3	4	5	6	7	8	9	10	11

A from of nomination in the prescribed from duly filled in is closed.

Signature of applicant	Signature of Secretary
	(with office seal)
	Signature of applicant

Office of the Director of Urban Affairs, Thiruvananthapuram

No. dated

Returned with Account No. allotted. This number should be quoted in all correspondence connected therewith.

Director