

FORM - A
[See Rule XXX-6(1)]

Form of Application for admission to Kerala Aided School Employees Provident Fund

Name of the Applicant	Official designation	School/ Institution in which employed	Name of management (whether individual or corporate) to be specified)	Whether Governed by Chapter XXIV B or XXVII B of KER or not	Whether applicant's service is pensionable or not	Date of commencement of continuous officiating service	Rate of emoluments per mensum	Rate of subscription per mensum	If subscriber to any other fund the name of such fund	Whether the applicant has a family or not	Account number to be allotted by the Account Officer	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13

A form of Nomination in the prescribed form, duly filled up is enclosed.

Station:

Date :

Enclosure

Signature of applicant

Signature of the Head of the Institution

OFFICE OF THE DIRECTOR OF PUBLIC INSTRUCTIONS, THIRUVANANTHAPURAM
(Provident Fund Branch)

No.

Dated

Returned with account number allotted. This number should be quoted in all correspondence connected there with.

Signature
Designation.