



# भारतीय प्रौद्योगिकी संस्थान गुवाहाटी INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

FORM – 6

## NOMINATION FOR DEATH-CUM-RETIREMENT GRATUITY

*[Please delete whichever is not applicable]*

I, Mr. / Mrs. / Ms..... having/not having a family, hereby nominate the person(s) mentioned below, who is(are)/isn't(aren't) member(s) of my family as defined in the Death-cum-Retirement Gratuity Rules of the Statute and confer on them the right to receive the amount to the extent specified below any gratuity that may be sanctioned by the Institute in the event of my death while in service and the right to receive on my death to the extent specified below any gratuity which having become admissible to me on my retirement may remain unpaid at my death and direct that the said amount shall be distributed among the said person(s) in the manner shown below against the name(s) :

Name(s) and address(es) of the nominee(s)	Relation-ship with Sub-scriber	Age (yrs)	Amounts or % share to be paid to each	Contingencies on the happening of which the nomination shall become invalid *	Name, address and relationship of the person(s) if any, to whom the right of the nominee shall pass in the event of the nominee(s) predeceasing the subscriber

This nomination supersedes the nomination made by me earlier on \_\_\_\_\_, which stands cancelled.

Dated this \_\_\_\_\_ day of the month of \_\_\_\_\_ in the year \_\_\_\_\_ at \_\_\_\_\_ (place)

### Two witnesses to sign:

1. Signature : \_\_\_\_\_

Name : \_\_\_\_\_

Address : \_\_\_\_\_

2. Signature : \_\_\_\_\_

Name : \_\_\_\_\_

Address : \_\_\_\_\_

Signature of the employee

Emp\_No.: \_\_\_\_\_

### ADMN. NOTE:

\* Note : Where a subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

Important : Please draw lines across blank space below the last entry to prevent insertion of any name after you have signed.