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| Emp No. :  Full Name. : Vidhyamalathi M  **Nomination Form** | | | | |
|  | Sr. No | Nominee | Relationship with the Employee | Date of Birth |
| **F & F** | A | Muthumani D | Father | 17-10-1968 |
|  | | | | |
| **Personal Accident** | A | Muthumani D | Father | 17-10-1968 |
| Signature of the Employee  Date : 17-12-2023 | | | | |