



Composite Declaration Form -11

(To be retained by the employer for future reference)

EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 & 57) &

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1	Name of the member																	
2	Father's Name <input type="checkbox"/> Spouse's Name <input type="checkbox"/>																	
3	Date of Birth: (DD / MM / YYYY)																	
4	Gender: (Male/Female/Transgender)																	
5	Marital Status: (Married/Unmarried/Widow/Widower/Divorcee)																	
6	(a) Email ID: (b) Mobile No.:																	
7	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)																	
8	KYC Details: (attach self attested copies of following KYCs) a) Bank Account No. : b) IFS Code of the branch: c) AADHAR Number d) Permanent Account Number (PAN), if available																	
9	Whether earlier a member of Employees' Provident Fund Scheme, 1952	Yes / No																
10	Whether earlier a member of Employees' Pension Scheme, 1995	Yes / No																
11	Previous employment details: [if Yes to 9 AND/OR 10 above] – Un-exempted <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 15%;">Establishment Name & Address</th> <th style="width: 10%;">Universal Account Number</th> <th style="width: 10%;">PF Account Number</th> <th style="width: 15%;">Date of joining (DD/MM/YYYY)</th> <th style="width: 15%;">Date of exit (DD/MM/YYYY)</th> <th style="width: 10%;">Scheme Certificate No. (if issued)</th> <th style="width: 10%;">PPO Number (if issued)</th> <th style="width: 15%;">Non Contributory Period (NCP) Days</th> </tr> </thead> <tbody> <tr> <td style="height: 80px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Establishment Name & Address	Universal Account Number	PF Account Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non Contributory Period (NCP) Days								
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12	Previous employment details: [if Yes to 9 AND/OR 10 above] – For Exempted Trusts <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 25%;">Name & Address of the Trust</th> <th style="width: 10%;">UAN</th> <th style="width: 10%;">Member EPS A/c Number</th> <th style="width: 10%;">Date of joining (DD/MM/YYYY)</th> <th style="width: 10%;">Date of exit (DD/MM/YYYY)</th> <th style="width: 10%;">Scheme Certificate No. (if issued)</th> <th style="width: 15%;">Non Contributory Period (NCP) Days</th> </tr> </thead> <tbody> <tr> <td style="height: 80px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Name & Address of the Trust	UAN	Member EPS A/c Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non Contributory Period (NCP) Days									
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13	a) International Worker: b) If yes, state country of origin (India/Name of other country) c) Passport No. d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]	Yes / No 																