

**FORM 1**  
[See Rule 53(1)]

**Nomination for Retirement Gratuity/Death Gratuity**

When the Government servant has a family and wishes to nominate one member, or more than one member, thereof.

I,....., hereby nominate the person/persons mentioned below who is/are member(s) of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity the payment of which may be authorised by the Central Government 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 retirement may remain unpaid at my death -

| Original nominee/s                     |  |     |  | Alternate nominee/s   |   |
|--|--|-----|--|---|---|
| Name and addresses of nominee/nominees | Relations hip with the Governm ent Servant | Age | Amount or share of gratuity payable to each* | Name, address relationship and age of the person or persons if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Government servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity | Amount or share of gratuity payable to each** |
|  |  |     |  |   |   |

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

Dated this ..... day of ..... 2014 at .....

Witnesses to signature :

1. ....
2. ....

Signature of Government Servant

(To be filled by the Head of Office)

Nomination by.....  
Designation.....  
Office.....

Signature of Head of Office  
Date.....  
Designation.....

**FORM 3**  
**Details of Family**  
**[See Rule 54(12)]**

Name of the Government servant .....

Designation .....

Date of birth .....

Date of appointment .....

Details of the members of my family \*as on .....

| S.No. | Name of the members of family | Date of Birth | Relationship with the officer | Initials of the Head of office | Remarks |
|-------|-------------------------------|---------------|-------------------------------|--------------------------------|---------|
| (1)   | (2)                           | (3)           | (4)                           | (5)                            | (6)     |
| 1.    |                               |               |                               |                                |         |
| 2.    |                               |               |                               |                                |         |
| 3.    |                               |               |                               |                                |         |
| 4.    |                               |               |                               |                                |         |
| 5.    |                               |               |                               |                                |         |
| 6.    |                               |               |                               |                                |         |
| 7.    |                               |               |                               |                                |         |
| 8.    |                               |               |                               |                                |         |
| 9.    |                               |               |                               |                                |         |

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office any addition or alteration.

|                |                                 |
|----------------|---------------------------------|
| Place.....     | Signature of Government servant |
| Dated the..... |                                 |

\*Family for this purpose means family as defined in Clause (b) of sub-rule (14) of Rule 54 of the CCS (Pension) Rules, 1972.

NOTE. - Wife and husband shall include respectively judicially separated wife and husband.

**HOME TOWN DECLARATION FORM**

In terms of para 1 of Ministry of Home Affairs's O.M. No. 43/1/55-Ests(A), Part-II dated 11.10.1956, as amended from time to time, I, hereby declare that .....(in the State/UT of ..... ) is my Home-Town.

I also certify that the declared as my home town is the one which requires my physical presence at intervals for the following reasons\* :-

- 1. ....
- 2. ....
- 3. ....
- 4. ....
- 5. ....

Yours faithfully,

Name.....

Designation.....

Dated : .....

**ACCEPTANCE BY CONTROLLING AUTHORITY**

'Home Town' as declared above is accepted.

Signature.....

Designation.....



**FORM NO. 8**  
**(SEC. PARA 19.7)**  
**NOMINATION FOR BENEFITS UNDER THE CENTRAL GOVERNMENT EMPLOYEES**  
**GROUP INSURANCE SCHEME, 1980**

(When the Government servant has a family and wishes to nominate one member or more than one member thereof)

I,.....nominate the person(s) mentioned below who is/are member(s) of my family, and confer on him/them the right to receive to the extent specified below any amount that may be sanctioned by the Central Government under the Central Government Employees Group Insurance Scheme, 1980 in the event of my death while in service or which having become payable on my attaining the age of superannuation may remain unpaid at my death.

| Name & Address(es) of Nominee/Nominees | Relationship with Govt. Servant | Age | *Share of amount to be paid to each | Contingencies on the happening of which the nomination shall become invalid | Name, address and relationship of the person, if any, to whom the right of the nominee shall pass in the event of His/Her predeceasing the Govt. service |
|--|---------------------------------|-----|-------------------------------------|---|--|
| 1                                      | 2                               | 3   | 4                                   | 5   | 6  |
|  |                                 |     |                                     |   |  |
|  |                                 |     |                                     |   |  |
|  |                                 |     |                                     |   |  |
|  |                                 |     |                                     |   |  |
|  |                                 |     |                                     |   |  |
|  |                                 |     |                                     |   |  |

Dated this ..... day of ..... 2014 at .....

Signature of two witness:

1. ....

2. ....

Signature of Government servant.

Name.....

Designation.....

Employee Code.....

Tel..... Intercom.....

N.B. The Government servant should draw line across the blank space below his last entry to prevent the insertion of any names after he has signed.

\* This column should be filled in so as to cover the whole amount may be payable under the Insurance Scheme.