

PROFORMA FOR APPLICATION FOR WITHDRAWAL FORM PROVIDENT FUNDS

Ministry of

Department of /Office

Application for withdrawal form
(Here enter the name of the fund)

- 1. Name of the Subscriber :
- 2. Account Number :
- 3. Designation (with Department suffix) :
- 4. Pay :
- 5. Date of joining service and the date of superannuation :
- 6. Balance at credit of the subscriber on the date of application as below :
 - (i) Closing balance as per statement for the year
 - (ii) Credit from to on account of monthly subscriptions
 - (iii) Refunds made to the fund after the closing balance, vide (i) above
 - (iv) Withdrawal during the period from to
 - (v) Net balance at credit on the date of application
- 7. Amount of withdrawal required :
- 8. (a) Purpose for which the withdrawal is required :
- (b) Rule under which the request is covered :
- 9. Whether any withdrawal was taken for the same purpose earlier. If so, indicate the amount and the year. :
- 10. Name of the Account Officer maintaining the Provident Fund Account. :

Signature of Applicant

Date

Name

Designation

Section/Branch