

ഹയർ സെക്കൻഡറി ഡയറക്ടറുടെ  
കാര്യാലയം, ഹൗസിംഗ് ബോർഡ്  
ബിൽഡിംഗ്, ശാന്തി നഗർ,  
തിരുവനന്തപുരം.

പി.എഫ്4/12243/എച്ച്.എസ്.ഇ

തീയതി : 05/09/2014

### സർക്കുലർ

വിഷയം :- ഹയർ സെക്കൻഡറി വിദ്യാഭ്യാസം - കെ.എ.എച്ച്.എസ്.എസ് (+2) ഇ.പി.എഫ് - അധ്യമിഷൻ, എൻ.ആർ.എ, ട്രാൻസ്‌ഫർ ക്ലോഷർ, റിടയർമെന്റ് ക്ലോഷർ എന്നിവയുടെ അപേക്ഷാ ഫാരിഞ്ചർ - അപേക്ഷ സമർപ്പിക്കുന്നോൾ ശ്രദ്ധിക്കേണ്ട കാര്യങ്ങൾ - എന്നിവ സംബന്ധിച്ച്.

കേരള എയിഡിയ ഹയർ സെക്കൻഡറി സ്കൂൾ (+2) ഇ.പി.എഫ് അക്കൗൺട് അധ്യമിഷൻ, എൻ.ആർ.എ, ട്രാൻസ്‌ഫർ ക്ലോഷർ, റിടയർമെന്റ് ക്ലോഷർ എന്നിവയ്ക്ക് അപേക്ഷിക്കുന്നോൾ ചിലർ തെറ്റായ അപേക്ഷാഫാരിഞ്ചർ ഉപയോഗിക്കുന്നതായി കാണുന്നു. ആയതിനാൽ മേൽപ്പറഞ്ഞ അപേക്ഷകളുടെ നിർദ്ദിഷ്ട മാതൃകയിലുള്ള ഓരോ പകർപ്പും, ഈ അപേക്ഷകൾ പുതിപ്പിക്കുന്നോൾ ശ്രദ്ധിക്കേണ്ട കാര്യങ്ങളും ഇതോടൊപ്പം ചേർക്കുന്നു. നിർദ്ദിഷ്ട മാതൃകയിലല്ലാതെ സമർപ്പിക്കുന്ന അപേക്ഷകൾ ധാതൊരു കാരണവശാലും സീക്രിക്കറ്റുന്നതലും.

സീനിയർ ഫിനാൻസ് ഓഫീസർ  
ഡയറക്ടർക്ക് വേണ്ടി

എല്ലാ എയ്ഡിയ ഹയർ സെക്കൻഡറി സ്കൂൾ  
പ്രിൻസിപ്പൽമാർക്കും

പകർപ്പ് :- 1) റീജിയണൽ ഡെപ്യൂട്ടി ഡയറക്ടർ  
തിരുവനന്തപുരം/എറണാകുളം/കോഴിക്കോട്/  
കണ്ണൂർ/മലപ്പുറം/കോട്ടയം.  
2) സ്കൂള് ഫയൽ

## **NRA അപേക്ഷ സമർപ്പിക്കുന്നോൾ ശ്രദ്ധിക്കേണ്ട കാര്യങ്ങൾ**

1. അപേക്ഷ നിശ്ചിത മാതൃകയിലുള്ളതായിരിക്കണം (Form B1)
2. അപേക്ഷകൻ്റെ പേര്, Account Number, Date of joining in Service, Retirement Date എന്നിവ വ്യക്തമായി രേഖപ്പെടുത്തേണ്ടതാണ്.
3. ആദ്യമായി NRA യ്ക്ക് അപേക്ഷ സമർപ്പിക്കുന്നവർ PF Account തും നിന്നും ഇതുവരെ TA/NRA എടുത്തിട്ടില്ലെന്നു ഒരു certificate, സ്ക്രൂൾ പ്രിൻസിപ്പലിന്റെ letter pad തും അപേക്ഷയോടൊപ്പം സമർപ്പിക്കേണ്ടതാണ്.
4. അപേക്ഷയിലെ ഏഴാമത്തെ കോളത്തിൽ പണം പിൻവലിക്കുന്നതിനുള്ള കാരണം വ്യക്തമായി രേഖപ്പെടുത്തിയിരിക്കണം.
5. ഒൻപതാമത്തെ കോളത്തിൽ എത്ര രൂപയാണ് പിൻവലിക്കാൻ ഉദ്ദേശിക്കുന്നത് എന്നത് അക്കറ്റിലും അക്ഷരത്തിലും രേഖപ്പെടുത്തേണ്ടതാണ്.
6. ABC Statement ലെ Deposit column തും ഓരോ മാസത്തേയും Date of encashment, Gross Amount, Net Amount എന്നിവ രേഖപ്പെടുത്തിയിരിക്കണം. Deposit Column ലെ ഓരോ പേജും പ്രിൻസിപ്പൽ verify ചെയ്ത് ഒപ്പും സീലും പതിക്കേണ്ടതാണ്.
7. Deposit column തും അപേക്ഷകൻ്റെ പേരും അക്കാൻക നമ്പറും രേഖപ്പെടുത്തിയിരിക്കണം.
8. ABC statement ലെ B column തും last credit card issue ചെയ്തതിനുശേഷം credit ചെയ്തിട്ടുള്ള DA arrear രേഖപ്പെടുത്തുന്നോൾ ഓരോ Arrear amount കളും ഏതു ഗവൺമെന്റ് ഓഫീസ് പ്രകാരമാണുള്ളത് എന്ന് കൂത്യമായി രേഖപ്പെടുത്തിയിരിക്കണം.
9. ABC statement ലെ 'C' Column തും withdrawal details രേഖപ്പെടുത്തുന്നോൾ ഇതു വരെ എടുത്തിട്ടുള്ള TA/NRAയുടെ order No., Date of drawal, purpose എന്നിവ രേഖപ്പെടുത്തിയിരിക്കണം.
10. അപേക്ഷയിൽ കാണിച്ചിരിക്കുന്ന തുകകൾ എല്ലാം തന്നെ പ്രിൻസിപ്പൽ സുക്ഷ്മമായ പരിശോധനയ്ക്കു വിധേയമാക്കി ഒപ്പും സീലും രേഖപ്പെടുത്തിയ ശേഷം ബന്ധപ്പെട്ട RDDയ്ക്ക് സമർപ്പിക്കേണ്ടതാണ്.

## FORM B1

### Application for non-refundable withdrawal from the Kerala Aided Higher Secondary School Teacher's Provident Fund

1. Name and designation of the Subscriber with mobile number : .....
2. Pay and Dearness pay : .....
3. Provident Fund Account No. : .....
4. Name and Address of school with pin code : .....
5. Date of retirement on superannuation : .....
6. Total service (in years) under the management as on this date, and date of joining : .....
7. Object of the withdrawal :
  - (a) If the withdrawal is required for meeting the expenditure in connection with the ..... : .....
  - (i) Higher education of any child or dependent of the subscriber, specify the nature and duration of the course (in case of a dependent, also specify the nature and duration of the course (in case of a dependent, also specify whether the subscriber, has any child). : .....
  - (ii) marriage of a son or daughter or any other female relative dependent on the subscriber indicate also the month in which the marriage take place (In the case of dependent, specify also whether the subscriber has any daughter) : .....
  - (iii) illness of the subscriber or any person actually dependent on him mention the nature of illness also : .....
  - (iv) acquisition of a house and or site, furnish in whose name(s) [subscriber(s) and/or his wife's] it will be acquired and whether it is for the actual residence of the subscriber and/or his family. : .....

- (v) construction, re-construction, repairs, etc.  
of a house; state whether the site on  
which the house is proposed to be  
constructed or the site on which the  
house is proposed to be reconstructed,  
repaired, altered etc, is situated, is owned  
by the subscriber and/or his family. :
- b) If the withdrawal is required for payment of  
a loan taken for the ..... :  
(i) marriage of a son or daughter or any female  
relative dependent on him :  
Specify the amount of loan taken on account of the marriage the balance  
outstanding against it and the date on which the marriage has been celebrated.  
(ii) Construction of a house or allied purpose  
state the amount of loan expressly taken  
for the purpose, the balance outstanding  
Against it and in whose name [subscriber(s)  
and/or his wife's] the ownership of the  
house and/or site is vested. :
8. Amount of the loan, if any, taken by the  
subscriber and/or his wife from the Government  
under any scheme sponsored by them for the grant  
of house construction loans, and the number and date  
of the orders/proceedings in which sanction was  
issued therefore. :
- This column need be filled in only if the subscriber purpose to make a withdrawal for  
house construction or allied purpose.
9. Amount of the withdrawal proposed (both  
in figures and words) :
10. Name of the treasury at which payment is desired :
11. (a) Whether any non-refundable withdrawal  
was made by him from the fund previously  
for the same or a different object and, if so  
furnish the details thereof :  
(b) If any withdrawal was made as mentioned in :

(a) above, state whether he had submitted the utilization certificate in respect of that withdrawal to the appropriate authority within the prescribed time limit. If the certificate was not submitted within the said period furnish the reasons therefore. :

12. Special circumstances which necessitate the withdrawal (this column need be filled in only if the amount proposed to be withdrawn exceeds half the amount at the credit of the subscriber in the fund or six month's pay whichever is less, or if the withdrawal requires sanction in relaxation of any of the provisions in the statutes. :

### **Declaration**

I ..... do hereby declare that the above statements furnished by me are true and that I agree to abide by the Kerala Aided Higher Secondary School Employees Provident Fund rules as amended from time to time.

Place :

Dated Signature of the Subscriber

With full official address.

(To be filled in by the Principal)

I recommend for sanction the withdrawal of Rs. ..... (Rupees .....only) by the subscriber.

### **Certificates**

1. It is certified that I have verified the particulars furnished by the subscriber against columns 2,3,4,5,6,8 and 11 with reference to the relevant records in my office and that they are found to be correct.
2. It is also certified that I have caused enquiries to be made about the statement contained in the application regarding the object of the proposed withdrawal and that I am satisfied that it is bonafide.

Station

Dated Signature of Principal.

### **Verification Report**

1. Total amount at the credit of the subscriber in the fund.
2. Amount admissible under the Rules.
3. Rule(s) under which the sanction permitting the withdrawals by the subscriber is to be accorded.
4. Any other facts which require special consideration.

Account Officer/Principal

Endt. No. ..... dated .....

To

The .....

The Verification report shall be furnished by the Principal with reference to the latest annual account slip issued by the Account Officer and the office copies of the pay bills etc., relating to the subsequent period.

**FORM B****Form of application for Temporary Advance against deposit in Kerala Aided Higher Secondary School Teacher's Provident Fund**

- 1) Name and Account No. of the Subscriber : .....
- 2) Monthly pay. Dearness pay and Designation : .....
- 3) Date of Birth & Mobile Number : .....
- 4) Amount of advance required  
(both in figures and words) : .....
- 5) Purpose for which it is required : .....
- 6) Date of complete repayment of the previous loan : .....
- 7) Details of advance pending recovery
  - a. The amounts of previous advances : .....
  - b. Dates of drawal of each advance : .....
  - c. Balance outstanding against each advance : .....
- 8) Amount of consolidated advance  
(Item Nos. 4 and 7 (3) and the number and amount of monthly instalments in which the consolidated advance is proposed to be repaid)
- 9) Name of treasury at which payment is desired : .....
- 10) I hereby declare that the above statements are true and that I agree to abide by the Kerala Aided Higher Secondary School Teacher's Provident Fund rules in force. I also promise to repay the above advance in equal monthly instalments.

*Signature of the subscriber with  
Name and Designation*

Place :

Date :

- 11) Enquiry Certificate : .....

Place :

Date :

*(Signature of the Principal)*

**Verification Report**

- 12) Total amount at the credit of the applicant : .....
- 13) Amount of advance admissible : .....
- 14) Number of instalments of repayments : .....
- 15) Any other fact requiring consideration : .....

*Accounts Officer/Head Office/ Department.*

**FORM – J**  
[See Rule 28 (C)]  
**KAHSS (+2) EPF**

**FORM OF APPLICATION FOR CONVERSION OF AN ADVANCE INTO A PART FINAL WITHDRAWAL**

- 1) Name of the subscriber : .....
- 2) Designation and office to which attached : .....
- 3) Pay : .....
- 4) Name of the Provident Fund and Account Number : .....
- 5) Balance at credit on the date of application  
(Amount actually subscribed by him along with interest due thereon) : .....
- 6) Balance outstanding to be converted in to a part final withdrawal : .....
- 7) (a) Purpose for which advance taken : .....
- (b) Date of payment of the advance : .....
- (c) Amount of advance sanctioned : .....
- 8) Particulars of communication under which advance was sanctioned : .....
- 9) Whether any advance or part final withdrawal has been drawn previously for the purpose mentioned above. If so, particulars thereof. : .....
- 10) (a) Total service, including broken periods, if any, on date of this application. : .....
- (b) Period of service left on the date of application for attaining the age of superannuation. : .....
- (c) The date of superannuation : .....

Place : .....

Signature of the Applicant

Date : .....

Dated :

The above particulars have been verified and found to be correct.

Signature and Designation of  
Recommending Authority

## **ORDER**

No. ....

Dated : .....

Sanction is hereby conveyed/is accorded under Rule 30 (5) of the KAHSS (+2) EPF Rules for the conversion into part final withdrawal of an amount of Rs. ....(Rupees .....only) being the outstanding balance out of the KAHSS (+2) EPF advance of Rs. .... Sanctioned on ..... and drawn in Bill No. .... of ..... for the (purpose) ..... to Shri/Smt. ..... of the Office of the (KAHSS (+2) EPF Account No. ....)

Signature  
.....

Designation  
.....

Dated  
.....

Copy forwarded to :-

- (i)
- (ii)

കേരള എയിസ്യസ് ഹയർ സെക്കുലുകളിലെ അദ്ധ്യാപകർ പ്രോവിഡർ ഫിൽ  
ക്ഷോഷിനിന് അപേക്ഷിക്കുന്നവാർ ശ്രദ്ധിക്കേണ്ട കാര്യങ്ങൾ.

1. അപേക്ഷ നിർദ്ദിഷ്ടം മാതൃകയിലായിരിക്കണം. (Form E)
2. അപേക്ഷകൾ അദ്ധ്യാപകൾ വിരമിച്ച് ഒരു വർഷത്തിനകം ബന്ധപ്പെട്ട ആർ.ഡി.ഡി ഓഫീസ് മുഖ്യാന്തരം ഈ ഓഫീസിൽ സമർപ്പിക്കേണ്ടതാണ്.
3. അപേക്ഷയോടൊപ്പം സമർപ്പിക്കുന്ന ഷഡ്യൂളുകളിൽ ശരിയായ അക്കൗണ്ട് നമ്പർ രേഖ പ്ലൈറ്റുത്തിയിരിക്കണം. റിടയർമെന്റ് ഡോക്യുമെന്റേഷൻ വ്യക്തമായി രേഖപ്ലൈറ്റുത്തിയിരിക്കണം.
4. അദ്ധ്യാപകന്റെ പേര്, സ്ഥിരമായ വിലാസം, തീയതിയോടുകൂടിയ ഒപ്പും അപേക്ഷയോടൊപ്പമുള്ള ഡിസ്ട്രിബ്യൂഷൻ കാണിക്കേണ്ടതാണ്. അതിനോടൊപ്പം രണ്ടു സാക്ഷികൾ അവരുടെ പേരും, ജോലിയും രേഖപ്ലൈറ്റുത്തി തീയതിയോടുകൂടിയ ഒപ്പും രേഖപ്ലൈറ്റുത്തിയോടുകൂടിയ ഒപ്പും രണ്ടിലും പ്രിൻസിപ്പാർ തീയതിയോടുകൂടി സാക്ഷ്യപ്ലൈറ്റുത്തിയോടുകൂടിയ ഒപ്പും.
5. അപേക്ഷയിൽ ട്രഷറിയുടെ പേര് രേഖപ്ലൈറ്റുത്തിയിരിക്കണം.
6. പ്രിൻസിപ്പാർ സാക്ഷ്യപ്ലൈറ്റുത്തിയ ഓപ്പഷൻ ഫോം അപേക്ഷയോടൊപ്പം സമർപ്പിക്കേണ്ടതാണ്.
7. പ്രിൻസിപ്പർ/ആർ.ഡി.ഡി സാക്ഷ്യപ്ലൈറ്റുത്തിയ Verification Report.
8. അവസാനം ലഭിച്ച ക്രയിറ്റ് കാർഡിന്റെ കോപ്പി.
9. മുൻ വായ്പ എടുത്തിട്ടുണ്ടെങ്കിൽ ആ ഓർഡറിന്റെ കോപ്പി
10. ഡി.എ കുടിശ്ശികയെ സംബന്ധിച്ചുള്ള ഓരോ സർക്കാർ ഉത്തരവിലും വരിക്കാരന് ലഭിച്ച തുകയും ജി.ഒ നമ്പർ തീയതിയും അതിന്റെ കാലയളവും, ബിൽ മാറിയ തീയതിയും പ്രത്യേകം രേഖപ്ലൈറ്റുത്തിയോടുകൂടിയ ഒപ്പും.
11. വരിക്കാരൻ അക്കൗണ്ടിൽ നിന്നും NRA/TA എടുത്തിട്ടുണ്ടെങ്കിൽ എടുത്തിട്ടുള്ള വായ്പകൾ കുടാതെ മറ്റു വായ്പകളോന്നും എടുത്തിട്ടില്ലെന്നുള്ള പ്രിൻസിപ്പാളിന്റെ സർട്ടിഫിക്കറ്റ് അപേക്ഷയോടൊപ്പം പ്രത്യേകം നല്കേണ്ടതാണ്.
12. വരിക്കാരൻ പി.എഫ് വായ്പ നാളിതുവരെ എടുത്തിട്ടില്ലെങ്കിൽ വായ്പ എടുത്തിട്ടില്ലെന്നു എബിസി സ്കൂറ്റർമെന്റിലെ കോളം നമ്പർ സിയിൽ രേഖപ്ലൈറ്റുത്തി പ്രിൻസിപ്പാർ സാക്ഷ്യപ്ലൈറ്റുത്തിയോടുകൂടിയ ഒപ്പും.
13. കേരള എയിസ്യസ് സ്കൂൾ എംപ്ലോയീസ് പ്രോവിഡർ ഫിൽ അംഗമായിരുന്നവർ അവരുടെ കേരള എയിസ്യസ് സ്കൂൾ എംപ്ലോയീസ് പ്രോവിഡർ ഫിൽ തീർപ്പാക്കിയ തുക കേരള എയിസ്യസ് ഹയർ സെക്കുലുറി സ്കൂൾ പ്രോവിഡർ ഫിൽലേയ്ക്ക് മാറ്റിയിട്ടുണ്ടെങ്കിൽ അത് തെളിയിക്കുന്നതിനുള്ള രേഖയുടെ കോപ്പി (ചെല്ലാൻ/അക്കൗണ്ടിന്റെ ജനറൽ ഓഫീസിൽ നിന്നുള്ള അറിയിപ്പ്) സമർപ്പിക്കേണ്ടതാണ്.
14. ഓരോ മാസത്തെയും ഷഡ്യൂളിന്റെ കോപ്പിയിൽ Gross Amount, Net Amount, Date of Encashment എന്നിവ രേഖപ്ലൈറ്റുത്തി പ്രിൻസിപ്പർ സാക്ഷ്യപ്ലൈറ്റുത്തി അപേക്ഷയോടൊപ്പം സമർപ്പിക്കണം.

15. ട്രാൻസ്‌ഫർ കേംഡറിന് അപേക്ഷിക്കുന്നേം വരിക്കാരൻ ജോലി നോക്കിയിരുന്ന എയ്യധി സ്കൂളിൽ നിന്നുള്ള റിലീഫിംഗ് ഓർഡറിന്റെ കോപ്പി നിർബന്ധമായും സമർപ്പിക്കേണ്ടതാണ്.
16. റിടയർമെന്റിന് മുമ്പാണ് കേംഡർ അപേക്ഷ സമർപ്പിക്കുന്നതെങ്കിൽ രൂൾ 30 (സി) അനുസരിച്ചുള്ള ഓപ്പഷൻ ഫോറം കുടി സമർപ്പിക്കേണ്ടതാണ്.
17. സർവ്വീസിലിരിക്കേ മരിച്ചുപോയ ജീവനക്കാരുടെ അപേക്ഷ സമർപ്പിക്കുന്നേം അപേക്ഷയോടൊപ്പം Nomination Form (രണ്ടു സാക്ഷികളുടേയും, വരിക്കാരന്റെയും ഒപ്പോടുകൂടിയ) Death Certificate ന്റെ copy, Departmental Enquiry Certificate/Heirship Certificate എന്നിവ കുടി ഹാജരാക്കേണ്ടതാണ്.

**Form E**  
**(See Rule – 42)**

**APPLICATION FOR CLOSURE OF KERALA AIDED HIGHER SECONDARY SCHOOL TEACHERS**  
**PROVIDENT FUND ACCOUNT**

1. Name and Account No :
2. Designation and Basic Pay :
3. School Address with Pin code :
4. Where he had drawn his salary for the month immediately preceding in the month in which he retires or proceeds on leave preparatory to retirement from service on superannuation.  
If so, furnish the date of drawal of salary. :
5. Date of his quitting service(also state whether he will be quitting/he quitted the service by Retirement or proceeding on leave preparatory to retirement or if he already quitted service otherwise. specify whether he quitted service by discharge, dismissal, resignation, or death. :
- \* The form shall be carefully filled in by the subscriber and submitted to the Principal. In the case of a subscriber who is no more, the principal shall obtain from the nominee(s) in his/her/their absence from the other claimant(s) immediately after the death of the subscriber, an application for closure of the account and to forward it with necessary document to the Account Officer within a fortnight of the receipts of the application. The Principal will such assistance to the nominees or claimants as is necessary to fill in the form of application properly.
6. (a) No. and date of the bill/Treasury voucher in which the last provident under deduction was made (Also indicate the name of the Treasury where the bill/voucher was encashed) :  
  
(b) The amount of last fund deduction .....  
    (i) Subscription Rs. :  
    (ii) Refund of advance Rs. :  
(c) Gross amount of the bill/ Treasury Voucher :  
(d) Net amount of the bill/Treasury Voucher :  
(e) Date of encashment of the bill/Treasury Voucher :

7. (a) Whether any temporary advance was sanctioned to him from his Kerala Aided Higher Secondary School Teacher's Provident Fund Account during the twelve Months immediately preceding the date of Application for closure of the account/his quitting service (if so, indicate the amount of the advance the number and date of sanction and the date of drawal of the amount.
- (b) Whether any non-refundable withdrawal was sanctioned to him from PF Account during the twelve months immediately preceding the date of application for closure of account/his quitting service. (If so indicate amount of advance number and date of sanction and the date of withdrawal of the amount.  
(In both cases, if any amount was sanctioned for payment of insurance premium or for purchase of any policy, that fact should also be noted.
8. Particulars of life Insurance policies finances by him from PF money which are to be released.

Policy No. and Date of purchase	Sum Assured Rs.
1.	
2.	
3.	
4.	

9. Name of the office through which payment to be made :

10. (A) In the event of death of subscriber before making final disbursement of the PF amount, furnish also ----- :
- (a) Date of birth of the subscriber  
(b) Date of commencement of continuous service under the management

- (c) Date of Birth
- (d) Whether proof of death in the form of  
Death certificate issued by the Municipal  
Authorities or other competent authorities  
is available (the proof of death needs be insisted  
upon only incases of doubt)
- (e) Whether a valid nomination executed by the Subscriber  
in accordance with the Rules exist. (If so furnish the  
age(s) and name(s) of the nominee(S) and his/her/their  
relationship to the subscriber)
- (f) In the case of a subscriber who sent in his nomination  
while unmarried whether he has acquired a family  
after the submission of the first nomination and whether  
he has submitted a fresh one thereafter.

(B) If there is no valid nomination furnish a list of  
Member(s) of the subscriber's family as defined  
In rule of the Kerala Aided higher Secondary School,  
College Teacher's Provident Fund Rules surviving  
on the date of death of the subscriber to whom the  
PF money is payable together with his/her/their  
name(s) age(s) and respective relationship to  
the subscriber. (In the case of daughter(s) indicate  
whether she/they is are married or unmarried.  
If married, furnish whether her/their husband(s)  
is/are alive.

(C) In case where there is no valid nomination and where  
no Member of the family of the subscriber as defined  
in rule 44 of the Kerala Aided Higher Secondary  
School Teachers Provident Fund rule survives.  
Furnish the name(s) of the person(s) to whom  
the PF money is payable to be supported by  
letters of probate or succession certificate. Etc)

(D) If the subscriber had contained in service up to the date of his retirement on  
superannuation furnish.

- (i) Date of his retirement from service on superannuation.
- (ii) Amount at his credit in the fund at the time of his retirement.
- (iii) Amount finally withdrawn after retirement, if any.

## DECLARATION

I ..... do hereby declare that the particulars mentioned above are true. I further declare that I do not/do accept the balance standing to my credit in the Kerala Aided Higher Secondary School Teacher's Provident Fund Account No. ..... communicated to me by the Account Officer in his annual Account statement for the financial year ended on the ..... (\*\*)  
..... (here enter the financial year immediately preceding the date of his quitting service).

Date of signature of the Subscriber  
[Nominees(s) other claimant(s)]  
with full Home Address.

## CERTIFICATES

### (To be filled in by Principal)

1. Certified after due verification with reference to the records available in my office that Shri/Smt. ..... Subscriber to PF Account No.

..... has drawn on ..... his salary for the month immediately preceding the month in which he retires or proceeds on leave preparatory to retirement from service on superannuation and that he will be retiring/proceeding on leave preparatory to retirement from service for ..... months/has been discharged/dismissed/removed/has resigned/finally from service with effect from ..... F.N/A.N and his resignation has been accepted.

\* If the application is submitted by a nominee or other claimants, the second sentence in the declaration may be scored off.

\*\* If the subscriber has not received the annual account statement for the financial year immediately preceding the date of his quitting service he may indicate here the year of the latest annual account statement received by him. In cases where the subscriber does not accept the balance communicated to him, he should furnish hereby in a separate letter the reasons for not accepting the balance.

(2) Certified further after the verification with reference to the records available in my office that no temporary advance/non-refundable withdrawal was sanctioned to the subscriber from his Provident Fund Account during the 12 months immediately preceding the date of

his application for closure of the account/his after due verification with reference to the records available in my office that the following temporary advance(S) non-refundable withdrawal was/were sanctioned to the subscriber from his Provident Fund Account during the twelve months immediately preceding the date of his application for the closure of PF account/his proceeding on leave preparatory to retirement/quitting service.

<b>Sl. No.</b>	<b>Amount of Temporary Advance Rs.</b>	<b>Amount of Non- refundable withdrawal Rs.</b>	<b>No. and date of sanction</b>	<b>Date of voucher withdrawal</b>
1				
2				
3				
4				

3. Certified also that the entries against column 1,2,3,6 and 8 furnished by the subscriber /nominees(s) have been verified by me with reference to my office records and found correct.

**Station :**

**Date :**

**Signature of Principal**

- \* This certificate is not necessary in cases other than resignation. Certified also that he has quitted service with the prior permission of the Department to take up appointment in any Government Service.

## **FORM E2**

[See Rule XXX 43 (i) and 44 (i)]

(Application for closure of Kerala Aided Higher Secondary school Employees Provident Fund Accounts)

### A Details to be furnished by subscribers

1. (a) Name of the subscriber with account number and mobile number :  
(b) Designation & Basic Pay :
2. School Address with pin code :
3. Date effect from which you resigned Aided School Service :  
4. Have you resigned Aided School service to take up appointment in Government Service :  
5. (a) Have you been sanctioned and paid any Non-refundable advances or temporary advances during the 12 months proceeding the date of your quitting service? :  
(b) If so what are the numbers and date of sanctions and amounts :  
(i) Temporary Advance :  
(ii) Non refundable Advance :  
6. Give particulars of Life Insurance Policies finance by you from the PF money which are to be released :  
7. (a) What is amount of your credit in the fund communicated by the accounts Officer (PF) through the latest annual account statement received by you :  
(b) Do you accept as the balance as credit :  
(c) If not give details of the discrepancies :  
8. What is the address in which communications are to be sent to you :  
9. If you have resigned aided school service to take up appointment in Government service or another aided School :

- (a) Have you been admitted to GPF
- (b) If so what is your GPF account number
- (c) What is the address of the Government Institution in which you were working at the time or admission of GPF

Station

Date

Dated Signature of the Subscriber

---

**Details of furnished by the head of office and controlling officer**

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1. Was the resignation tendered by the subscriber for joining Government servant or another aided school
2. What is the date with effect from which resignation was accepted
3. Details of Temporary advance and non-refundable withdrawals paid to the subscriber during the 12 months proceeding the date of regulation

Amount	Sanction No. and date	Date of drawal	Treasury of the encashment of the bill
--------	--------------------------	----------------	--

---

- (a) Temporary Advances
- (b) Non-refundable withdrawls

Certified that the information furnished above has been verified by referring to the records in any office.

Signature of Officer (name of school with postal address)	Signature of Controlling Officer (give full address)
--	---

# **VERIFICATION REPORT**

- 1) Total amount at the credit of the subscriber in the fund
- 2) Amount admissible under the rules ..... (full amount) The verification report shall be furnished by the Head of Institution with reference to the latest annual account slip issued by the account officer and of the office copies of the pay bills etc. relating in the subscribed periods.
- 3) Rule (s) under which the sanction permitting the withdrawal by the subscriber is to be accounted.
- 4) Any other Loans require consideration

Ent. No.

Dated

Accounts Officer/Head of  
Institution/Department

To

The

---

## **DECLARATION**

I ..... do hereby declare that the above statement furnished by me are true and that I agree to abide by the Kerala Aided School Employees Provident Fund Rules as an amended from time to time.

Place

Date

Dated Signature of the Subscriber  
with full official address

---

To be filled in by the Head of Institution/ Department

I recommended for sanction the withdrawal of Rs. .....  
..... only) by the subscriber.

---

## **CERTIFICATE**

- 1) It is certified that I have verified the particulars furnished by the subscriber against column 2,3,4,5,6 and 11 with reference to the relevant records in my office and that they are found to be correct.
- 2) It is also certified that I have caused enquiries to be made above the statement certified in the application regarding adjustment of the proposed withdrawal and that I am satisfied that is bona fide.

Station

Date

Dated Signature of the Head of  
Institution/ Department

**Form E3**  
**[See Rule XXX – 43 (1) and (2) and 44 (1)]**

**APPLICATION FOR CLOSURE OF KERALA AIDED HIGHER SECONDARY SCHOOL TEACHERS  
PROVIDENT FUND ACCOUNT**

**IMPORTANT** – This form is to be used only when the subscriber died before retirement or before receiving the amount in his PF account.

**A. Details to be furnished by the Nominee or other claimants**

1. Name and Account No (as indicated in the latest Annual Statement received from the Accounts Officer (PF)) :
2. Designation and Basic Pay :
3. Name of School in which the subscriber worked last with Pin code :
4. Date of Death :
5. Have you produced proof of death of the subscriber before the Head of the Office :
  
8. (a) Has the subscriber been sanctioned any Non- Refundable withdrawal or temporary advance during the 12 months preceding the date of quitting service :
  - (i) Non-refundable withdrawal :
  - (ii) Temporary Advance :  
(b) If so, the number and date of sanctions :
  - (i) Non-refundable withdrawals :
  - (ii) Temporary Advances :  
(c) Amount
  - (i) Non-refundable Withdrawals :
  - (ii) Temporary Advances :
  
9. Give particulars of Life Insurance of Policies financed by the subscriber from PF money which are to be released :
  
10. (a) What is the amount at Credit in the fund as communicated by the Account Officer (PF) through the latest Annual Account Statement :  
  
(c) Do you accept this balance as correct :

11. Have you ascertained from the Account Officer (PF) or the Head of the Office, that you are the Nominee :

Note :- The item below need be filled up only when the subscriber has not filed a nomination in favour of a member of the "Family"

12. Had the subscriber a family? If so, Please furnish the details of the members of the "Family", viz :-

- i. Name and address of wife :
- ii. Name of minor children with dates of birth :
- iii. Name and address of daughters who were unmarried or widows at the time of death of the subscriber :
- iv. Names and address of widows of the subscribers son who died before the death of the subscriber :
- v. Minor children of the sons of the subscriber who died before the death of the subscriber. :
- vi. Unmarried daughters of sons of the subscriber who died before the death of the subscriber :

13. If there is no "Family"

- a. What is your relationship with the subscriber :
- b. Has the subscriber filed a nomination in your Favour :
- c. If there is no nomination in your favour have you obtained a heirship certificate from the Tahasildar or a succession certificate a from the court of law :

Note :- When the balance in the PF account exceeds Rs. 5,000 and when there is no nomination or a "Family", a succession certificate from a Court of law has to be produced.

14. What is the address in which communications are to be sent to you

Station :

Date :

Name and Signature of Applicant

**B. Details to be furnished by the Head of office and the Controlling Officer**

- 1) Have you satisfied yourself that the subscriber is dead and the date of death furnished by the claimant is correct :
- 2) Is a copy of the nomination tiled by the subscriber available with you? (If so please enclose it with this application)
- 3) Have you conducted a local enquiry and ascertained that the particulars furnished by the claimant against item (9) are correct?

Note :- the Head of the office and the controlling officer should conduct a local enquiry and satisfy themselves that the particulars furnished against item (9), furnished by the applicant are correct.

- 4) Details of Temporary Advances and Non-refundable withdrawals paid to the subscriber during the 12 months preceding the date of quitting service

<b>Sl. No.</b>	<b>Type</b>	<b>Sanction No. and Date</b>	<b>Date of Withdrawal</b>	<b>Treasury of encashment of the Bill</b>
5.	(a) Temporary Advance  (b) Non-refundable Withdrawals  Details of last fund deduction :-  (a) Subscription  (b) Refund of advance  (c) Total deduction  (d) Gross and net amount of Bill  (e) Date of encashment, and Name of Treasury			

Certified that information furnished above has been verified by referring to the records in my office.

Signature of Head of Office

(Name of school with postal address)

Signature of Controlling Officer

(Give full address)

## **ANNEXURE**

**STATEMENT OF DEPOSIT AND WITHDRAWALS FOR THE PERIOD AFTER THE LATEST CREDIT  
CARD TILL THE DATE OF APPLICATION FOR NRA/TA OF KERALA AIDED HIGHER SECONDARY  
SCHOOL (+2) EMPLOYEES PROVIDENT FUND.**

Name of Subscriber : .....

KAHSS (+2) EPF Account No. : .....

## A. DEPOSITS

**B. DETAILS OF DA CREDITED TO KAHSS (+2) EPF BASED ON WHICH WITHDRAWAL IS ALLOWED SINCE LAST CREDIT CARD**

Sl. No.	No. & Date of G.O. as per which the DA arrear was credited to PF	Period to which the arrears relate	Amount credited to PF	Date of encashment of the bill	Gross amount of the bill	Net amount of the bill	Name of Treasury
1	2	3	4	5	6	7	8

**C. DETAILS OF WITHDRAWALS MADE AFTER THE LAST CREDIT CARD**

No. & Date of sanction	Date of Drawal	Amount	Name of Treasury	Nature of advance TA or NRA	Purpose
1	2	3	4	5	6

**D. ABSTRACT**

1. Total amount at Credit as per last credit card for the Year ..... : .....
2. Total amount Credited to PF account after last credit card  
(Total of A & B above) : .....
3. Grand Total (Item 1 + 2) .....
4. Deduct amount of advance drawn after the issue of the  
last credit card (vide details furnished under c above) : .....
5. Net balance at credit of the subscriber (3 + 5) on the date  
of application : .....

---

Credited that the particulars furnished above have been verified with reference to pay,  
abstract, acquittance roll, KAHSS (+2) EPF Pass Book and other connected records and found  
correct.

Signature of Drawing & Disbursing Officer/  
Signature of Subscriber in the case of Gazetted Officer

Date :

Name :

Place :

Designation :

Note :- If there is no withdrawal since the last credit card that fact should be specifically stated  
in the proforma.

## **ANNEXURE FORM II**

### **FORM OF DECLARATION**

Final payment of accumulation in the KAHSS (+2) EPF Account No. ..... having been agreed to be authorized in my favour I .....

.....  
hereby that I clearly understand the payment is strictly provisional and is subject to revision when any discrepancy in my KAHSS (+2) EPF account is detected at a later stage and I further promise that the upon revision, the Provisional payment made to me has been in excess of the amount eventually round admissible, I agree to repay excess payment in lump failing which I agree that the amount may be recovered from me under the provisions of the Revenue Recovery Act for the time being inforce.

Dated Signature of the Subscriber

Name and Home Address

#### **Witness I**

Name : .....

Designation and Address : .....

Dated Signature : .....

#### **Witness II**

Name : .....

Designation and Address : .....

Dated Signature : .....

## **OPTION FORM**

I, ..... (Name) have opted under Rule 30 (C) G.P.F (Kerala) Rules, 1964 to discontinue subscription to the KAHSS (+2) EP Fund so as to close and withdraw the entire amount to my credit before retirement.

Name : .....

Account No. : .....

Designation : .....

Address : .....

Dated Signature : .....

Place :

Date :