

**FORM OF APPLICATION FOR THE SANCTION OF PART FINAL WITHDRAWAL\**  
**GENERAL PROVIDENT FUND.**

- 1) Name of the Subscriber :
- 2) Designation (Gazetted or Non Gazetted to be specified) with name of Office :
- 3) G.P.F. Account No. with Departmental suffix :
- 4) Subscriber pay as on date :
- 5) I) Total service including broken period of Service.
  - ii) Date of Birth :
  - iii) Date of appointment :
  - iv) Date on which he/she completed 15 years and twenty years of Service (including broken period of service) :
  - v) Due date or retirement on Superannuation:
- 6) Amount of Part Final Withdrawal now Required (to be expressed both in figures And words) :
- 7) Balance at credit of the subscriber as on this date (Vide details below)
  - i) Balance at the credit of subscriber as per the latest accountslip furnished by the Accountant General 2008-2009 :
  - ii) Add subsequent deposits and refunds Of withdrawals. :
  - iii) Total :
  - iv) Deduct subsequent withdrawals if any :
  - v) Balance as on date :
- 8) Purpose of withdrawal  
A) MARRIAGE:

i) Relationship to the subscriber of the period to be married. :

ii) If it is for the marriage of female relation of the subscriber other than his daughter State whether she is actually dependent On the subscriber.

iii) Certificate to the effect that no amount was drawn for the purpose as temporary advance.

iv) Details of previous part-final withdrawals drawn for the same purpose, if any.

#### **B. HIGHER EDUCATION:**

i) Relationship of the person to the subscriber.

ii) Nature of the course and period of study (viz) academic, technical, Engineering, Medical Scientific.

iii) Whether the education is outside India, or within India.

iv) Details of previous temporary advance, partfinal withdrawals sanctioned for higher education of the person (with) month of withdrawals, etc.

v) Whether the amount sanctioned has been restricted to the actual requirement for next six months and the withdrawal on each occasion should be treated as separate purpose.

#### **C. MEDICAL TREATMENT:**

i) whether withdrawal is for the illness of The subscriber or his dependent.

ii) Relationship of the person to the subscriber are whether he/she is actually dependent on the subscriber.



Name & Designation:

GPF A/C NO:

MONTH	SUBSCRIPTION	REFUND	No.of Instt.	TOTAL
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				
January				
February				
March				

2008-2009 Account Slip : Rs.

Total : Rs.

Deduct Subsequent withdrawals if any : Rs.

Balance as on date : Rs.

75% Amount : Rs.,

Amount of Partfinal withdrawal now required : Rs.

SIGNATURE

**Name & Designation:**

**GPF A/C NO:**

<b>MONTH</b>	<b>SUBSCRIPTION</b>	<b>REFUND</b>	<b>No.of Instt.</b>	<b>TOTAL</b>
<b>March</b>				
<b>April</b>				
<b>May</b>				
<b>June</b>				
<b>July</b>				
<b>August</b>				

**2009-2010 Account Slip**

**: Rs.**

**Total**

**: Rs.**

**Deduct Subsequent withdrawals if any**

**: Rs.**

**Balance as on date**

**: Rs.**

**75% Amount**

**: Rs.,**

**Amount of Partfinal withdrawal now required**

**: Rs.**

**SIGNATURE**