

NO. 5-ITPO(3)/E.I/2009 – VOL. – I
INDIA TRADE PROMOTION ORGANISATION
(ADMINISTRATION DIVISION)

New Delhi, the 17th October, 2013

CIRCULAR NO. ADMN./ /2013.

ITPO has introduced the Employees Pension Scheme (EPS), 1995 for ex-TFAI employees who retired on or after 1.11.2011

. In this regard, it has been observed that the employees as per list enclosed have not provided the requisite information regarding nomination in the prescribed proforma (copy of the same is enclosed).

All concerned employees including those who have retired / taken VRS and relieved on or after 1.11.2011 are hereby requested to duly fill up the proforma and provide all particulars as per the requirement to the undersigned. The information is required by 15th November, 2013 positively.

All are requested to comply with the instructions to take advantage of the Scheme. In case the details are not provided within the time frame, ITPO will not be in a position to process their cases.

(D.K.JAIN)
DY. GM(ADMN.)

To,

All Employees

Copy to :

1. PS to CMD
2. PA to ED
3. All HoDs
4. All DGMs
5. SM(MB) – For putting the circular on the ITPO website
6. Vigilance / E.II / E.III
7. Notice Board



India Trade Promotion Organisation
(E-III & E-II Section)

Please give full particulars of self and his/her dependants in
Duplicate (For Medical, LTC and other purposes)

1.	Name of the Employee																																											
2.	Designation																																											
3.	Employee No.																																											
4.	Father's/Husband's Name																																											
5.	Date of Birth																																											
6.	Date of Appointment																																											
7.	Present Address																																											
8.	Permanent Address																																											
9.	Details of Dependants :																																											
	<table border="1"><thead><tr><th>S.No.</th><th>Name of Dependant</th><th>Relation with Employee</th><th>Date of Birth</th><th>Age</th><th>Address of Dependant</th></tr></thead><tbody><tr><td>i)</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>ii)</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>iii)</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>iv)</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>v)</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>vi)</td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>	S.No.	Name of Dependant	Relation with Employee	Date of Birth	Age	Address of Dependant	i)						ii)						iii)						iv)						v)						vi)						
S.No.	Name of Dependant	Relation with Employee	Date of Birth	Age	Address of Dependant																																							
i)																																												
ii)																																												
iii)																																												
iv)																																												
v)																																												
vi)																																												
10.	Nominee for DCRG with percentage																																											
11.	Nominee for CPF with percentage																																											
12.	Nominee for Pension/GSLIS																																											
13.	Contact Nos. Landline No. Mobile No.																																											
14.	Email Address (if available)																																											

It is certified that the name(s) of persons given above are fully dependant on me and their income from all sources does not exceed Rs. 3500/- per month.

Signature of the employee_____

Name of the Employee_____

Place : Division_____

Date :

Internal Tel. No _____