

APPLICATION FOR ADVANCE FROM G.P.F

Ministry of

Department of /Office

Application for advance from
(Here enter the name of fund)

1.	Name of the subscriber	
2.	Account Number	
3.	Designation	
4.	Pay + DP + NPA +SI	Rs.
5.	Balance at credit of the subscriber on the date of application as below:	
	(i) Closing balance as per statement for the year	Rs.
	(ii) Credit from to on account of monthly subscription.	Rs.
	(iii) Refunds	Rs.
	(iv) Withdrawal during the period from to	Rs.
	(v) Net balance at credit	Rs.
6.	Amount of advance outstanding if any, and the purpose for which advance taken amount of advance taken and date of sanction Rs.....	Balancing outstanding as on date Rs.....
7.	Amount of advance required	Rs.
8.	(a) Purpose for which the advance is required	
	(b) Rules under which the request is covered	
	(c) If advance is required for education of children, following details may be given:-	
	(i) Name of the son/daughter	
	(ii) Class and institution / College where studying	
	(iii) Whether a day scholar or a hostler	
	(d) if advance is required for treatment of ailing Family member, following details may be given:-	
	(i) Name of the patient and relationship	
	(ii) Name of the Hospital/Dispensary/Doctor where the patient is undergoing treatment	
	(iii) whether outdoor/indoor patient	
	(iv) Whether reimbursement available or not	
	(e) If the advance is required for booking of Car/Scooter, etc., the date of appointment.	
	Note: In case of advance under Item 8 (d) and 8 (e), no certificate or documentary evidence would be required.	
9.	Amount of the consolidated advance (items 6 and 7) and number of monthly installments in which the consolidated advance is proposed to be repaid	Rs..... in installments
10.	Full particulars of the pecuniary circumstances of the subscriber, justifying the application for the advance	

I certify that particulars given above are correct and complete to the best of my knowledge and belief and that nothing has been concealed by me.

Signature of applicant

Name:.....

Designation:.....

Section/Branch:.....

Dated: