

Vivekananda Street, Cooch Behar - 736101, West Bengal, India, Ph. : (03582) 230218, Fax : (03582) 230833 E-mail : info@cbpbu.ac.in Website : www.cbpbu.ac.in

OFFICE OF THE REGISTRAR

Ref. No.: F64.V1/ REG /0515-20 Date: 07.04.2020

EXTREMELY URGENT NOTIFICATION

It is hereby notified for general information to all concerned (Teachers, Officers and Nonteaching Staff in the substantive capacity) of Cooch Behar Panchanan Barma University are hereby requested to submit the filled in applications for the General Provident Fund (copy enclosed) to the Office of the Registrar of the said University on or before 15.04.2020 through e-mail (to: registrar@cbpbu.ac.in and cc: fo.cbpbu@gmail.com). Further, you are requested to submit (02) Two hard copies of said applications after resuming the University.

This notification issued as per the requirement of the Treasury for Provident Fund deduction from the salary of the Month of April, 2020.

All concerned are requested to act accordingly.

Sd/-

Registrar

In communication to:

- 1. The Hon'ble Vice Chancellor, Cooch Behar Panchanan Barma University.
- 2. The Dean, Faculty of Post-Graduate Studies in Arts, Fine Arts, Performing Art and traditional Art Forms, Cooch Behar Panchanan Barma University.
- 3. The Dean, Faculty of Post-Graduate Studies in Science, Technology and Vocational Studies, Cooch Behar Panchanan Barma University.
- 4. The Finance Officer, Cooch Behar Panchanan Barma University.
- 5. The Controller of Examination, Cooch Behar Panchanan Barma University.
- 6. The Inspector of College, Cooch Behar Panchanan Barma University.
- 7. The Development Officer, Cooch Behar Panchanan Barma Uniersity.
- 8. The Assistant Registrar, Cooch Behar Panchanan Barma University.
- 9. The Assistant Controller of Examination, Cooch Behar Panchanan Barma University.
- 10. The System Administrator, Cooch Behar Panchanan Barma University.
- 11. All the Faculty Members in the substantive capacity, Cooch Behar Panchanan Barma University.
- 12. All the Non-teaching Staff in the substantive capacity, Cooch Behar Panchanan Barma University.
- 13. University Library, Cooch Behar Panchanan Barma University.
- 14. Dr Avijit Datta, System Administrator, Cooch Behar Panchanan Barma University, to upload the notice in the University Website.
- 15. Guard File.



Vivekananda Street, Cooch Behar - 736101 West Bengal, India

FORM No. 1 (See Ordinance 6)
Memorandum No. 396-Edn (SE) dated 19.06.1986.

I, Shri /Smt	, hereby declare that
I have joined the University service on and fi	rom(F.N./A.N.) as
of	Department and my
retirement benefit (Death-cum-Retirement) will be governed as per G.O. No. 396-Edn(SE) dt.19.06.1986. I
agree to bind myself and my nominees and le	egal heirs to abide by the Cooch Behar Panchanan Barma University
General Provident Fund Ordinances. I have	no objection if any contribution to General Provident Fund is kept in
the GPF Account to be maintained by the Ko	olkata Pay & Accounts Office-III. I further authorise the Cooch Behan
Panchanan Barma University to take approp	priate action with the relevant Departments(s) of the Government of
West Bengal at the appropriate time.	
Date:	
Address:	(Signature of the subscriber)
	Accepted
	Accepted
	Registrar Cooch Behar Panchanan Barma University

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FORM No. 2 (See Ordinance 8) Option form for subscription to the General provident Fund Account

I, Shri /Smt.	
subscribe to my General Provident Fund Account at the monthly	
(Rupees	
percent of my Basic Pay).	
I also request you to deduct my arrear P.F. Subscription from m	y salary in
number of equal monthly installments.	
(See Note Below)	
Signature of the subscriber in full: Designation & Department: Email ID & Contact No.: Date of Birth: Date of Joining in Post:	Accepted
Date of Confirmation in Service:	
	Registrar
	Cooch Behar Panchanan Barma University

Note:

- (i) The amount of subscription may be fixed either in lump sum rupees or in percentage of Basic Pay (i.e. Pay in Pay Band Academic Grade Pay/ Grade Pay) but in both the cases the amount will be at the rate of 8.33% minimum and 20% maximum of Basic pay.
- (ii) Arrear P.F. subscription shall be deducted in the number of monthly installments as opted by you subject to a maximum of 12 monthly installments.

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> FORM No. 3 (See Ordinance 6) NOMINATION FORM

GPF Account No	•••••					
I,		,D	esignation		Department	
			_, hereby nominate	e the perso	on(s) mentioned below who	
is/are member(s)/ non-member	per(s) of	my family as define	ed in ordinance 6(6) of Coo	ch Behar Panchanan Barma	
University General Provide	nt Fund	Rules, to receive th	ne amount that ma	ay stand t	o my credit in the General	
Provident Fund Account as i	ndicated	below in the event	of my death befor	e that amo	ount has become payable or	
having become payable has r	not been p	oaid.				
Name and Full address of the nominees(s)	Relationship with the Subscriber		Age of the nominee(s)		Share payable to each nominee	
1		2	3		4	
Contingencies on the happening of which the nomination will become invalid	Name, Address of the person(s), whom the right shall pass in the predeceasing the		of the of the or reason		e nominee is not a member e family as provided in rdinance 6(3), indicate the ons	
5		6	<u> </u>		7	
Date this day Two witnesses to Signature Certified that the subscriber						
Name and Address 1.		Signature		Signature	e of the Subscriber	
2.						
				1	Name in Block Letters	
Space for use by the Head of Office					Designation	
Nomination by Shri/Smi Designation				 Signa	ture of the Head of Office Designation	