

**DIRECTIONS FOR FILLING THE PENSION BOOK (FAMILY PENSIONERS - OF
THOSE EMPLOYEES WHO DIED WHILE IN SERVICE)**

Part -I

1. Details of Name of Deceased Employee,
2. Post/Designation
3. Name of office from which retired
4. Pension sanctioning authority – Vice-Chancellor
5. GE Index No. (For self-drawing employees only)
6. Case Type- FP for Family Pension
7. Type of Pension - OY for Ordinary/ EG for Ex-gratia
8. Pension Mode – C T - Compassionate
9. Rules applicable- KSR
10. Date of Birth
11. Date of Entry in CUSAT service- (in the case of prior service reckoned, that date of entry may be written in brackets outside the column provided)
12. Date of retirement- **No need to fill**
13. Date of superannuation- **No need to fill**
14. Date of demise-
15. Permanent address

(a) Name of family pensioner (spouse in the case of married employees/ children below the age of 25, un-married fully dependent daughters, incapacitated/physically, mentally challenged fully dependent children in the order of seniority, for pre-deceased spouse, if no-children, father/ mother- only when fully dependent on the pensioner

If no such members there, write Not Applicable

(b) Relation with pensioner- Wife/ Husband/Son/Daughter/
Father/Mother

(c) Date of birth of family pensioner

16. **No need to fill**

17. to 22. **No need to fill**

23. Details of Family members

Name/Date of birth/relation with pensioner/whether employed/whether physically or mentally challenged

(spouse in the case of married employees/ children below the age of 25, un-married fully dependent daughters, incapacitated/physically, mentally challenged fully dependent children in the order of seniority

24. to 29. **No need to fill**

THIS PAGE TO BE SIGNED BY THE HEAD OF OFFICE/DEPARTMENT where the deceased employee last worked.
Place & Date to be filled.

Part-II

PAGE NO. 21 . (Form 6) Application for Family pension & DCRG

Office: CUSAT

Designation of deceased employee :

Name of deceased employee:

1. Name of family pensioner
2. Relation with deceased employees
3. No need to fill
4. Date of demise:
5. Details of family members with name and address & date of birth of each
6. No need to fill
7. Details of family pension applicant (Date of birth, height, identification marks, left hand finger impressions starting from thumb to little finger)

THIS PAGE TO BE SIGNED BY THE FAMILY PENSIONER (with address & date of submission) Attested by any Gazetted Officer and signed by two witnesses.

PAGE No.29 Form 5A: Details of Family members of the deceased to be filled

Name of the employee

Designation

Date of birth

Date of appointment

Name of the family members including Date of birth, Relationship with the employee to be specified

THIS PAGE SHOULD BE SIGNED BY THE HEAD OF OFFICE (with stamp) Designation.

PAGE No.33

Affix a Photograph of Family Pensioner and **IT SHOULD BE ATTESTED BY THE HEAD OF OFFICE (with stamp) Designation.**

Details of Date of birth, Height, Identification marks (any 2), Left hand Finger impressions (starting from thumb to small finger) & specimen signature and **ATTESTED BY THE HEAD OF OFFICE (with stamp) Designation.**

After this, copy of **THIS PAGE** need to be affixed on page no. 32.

NOTE

1. Fill up all these details and submit TWO numbers of Pension Book and TWO PHOTOGRAPHS (of Family Pensioner) to the Finance Officer.
2. Place & date to be filled properly.
3. In the case of employees at Administrative Office & for the Heads of Departments/Schools/Centres, the Registrar is the authority to attest Pension Books. For all other employees, their concerned Head of the Departments will be the authority.