

NAVODAYA VIDYALAYA SAMITI, REGIONAL OFFICE BHOPAL

Statement Of Particulars For Allotment Of Employee Code Number To The Regular Employee Of The Samiti

Name of The Vidyalaya _____

Distt - _____ State - _____

Unit Code No - _____

S. No.	Name Of The Employee As Per Record [In CAPITAL Letters]	Name Of Subscribers Father / Husband [In CAPITAL Letters]	Sex	Date Of Birth [As Per Record]	Date Of Joining [As Per Appointment Letter]	Designation	Basic Pay	Employee Code No. Allotted By Samiti
1	2	3	4	5	6	7	8	10
1								

Ref:- **Regular Appointment Order No.** _____ **Dated** _____ **issued by the** _____

Office letter no. _____ **dated** _____ **forwarded alongwith Nomination form in duplicate copy to the Regional Office for necessary action.**
Their name have not been included in the previous statement and they are not already member of any provident fund.

Certified that the above employee is eligible to subscribe to the GSLIS fund in accordance with the relevant Rule

Signature of Principal with Office Stamp

Signature of Account Officer / Section

Encl :- 1. Date of Birth Certificate
2. Joining Letter issued by Vidyalaya