

APPLICATION FOR PAYMENT OF FAREWELL GRANT ON RETIREMENT

PART-I

- 1
- i) Name of the employee _____
 - ii) Designation and BPS _____
 - iii) Department _____
 - iv) Father/Husband's Name _____
 - v) CNIC No. _____
 - vi) Station/place of last posting _____

- 2 Last pay per month
- a) Basic pay _____
 - b) Special pay _____
 - c) Technical pay _____
 - d) Personal pay _____
 - e) Qualification pay _____
 - f) Any other pay _____

3 Date of Birth _____

4 Date of entry into service _____

a) PARC _____

b) Other organization _____

<u>Length of Service</u>	<u>From</u>	<u>To</u>	<u>Period</u>		
			Y	M	D
PARC					
Other organization					
Total service					

5 Date of retirement _____

6 Period for which contributions to Benevolent and Group Insurance Funds were not paid _____

7 Interruption in service (if any) _____

8 Present address of the employee _____

SIGNATURE OF THE
EMPLOYEE

PART-II

CERTIFICATE BY THE HEAD OF OFFICE

1. Certified that the information contained in Part-I of the application form is correct according to our record.
2. Certified that the above named employee was neither a contingent paid/work charged employee nor a deputationist from a provincial Government/Autonomous body.
3. Certified that the farewell grant claim has been preferred for the first time.
4. following documents are submitted with claim:
 - i. An attested copy of initial appointment letter of the employee (Annex-I)
 - ii. An attested copy of last pay certificate issued (Annex-II)
 - iii. A copy of retirement orders of the employee (Annex-III)
 - iv. An attested copy of PPO Book (where pension is not applicable a certificate of service record by Head of the Department) (Annex-IV)
 - v. An attested copy of CNIC (Annex-V)

(Seal and Signature)
Head of the Office