



**Annexure-A**

**THE UNIVERSITY OF AZAD JAMMU & KASHMIR  
Muzaffarabad**

**Death Grant Application  
PART-I**

1.
  1. Name of Deceased (employee) \_\_\_\_\_
  2. Last Posting Department/Section \_\_\_\_\_
  3. CNIC No. \_\_\_\_\_
  4. CNIC No. of Spouse (in case of married employee) \_\_\_\_\_
  5. Designation along with BPS \_\_\_\_\_
2. Last pay per month
  - (a) Basic Pay \_\_\_\_\_
  - (b) Special Pay \_\_\_\_\_
  - (c) Personal Pay \_\_\_\_\_
  - (d) Any other Pay \_\_\_\_\_
3. Date of Birth \_\_\_\_\_ 4. Date of entry into service \_\_\_\_\_
5. Date of Death \_\_\_\_\_ 6. Date of retirement/Struck off Strength, on account of Superannuation/ qualifying service/death during service \_\_\_\_\_
7. Name of beneficiary(s) (nominated or otherwise) \_\_\_\_\_

S.No	Name	CNIC No.	Date of Birth	Relationship with the Deceased	Profession	Marital Status	Monthly Income (Rs)
01							
02							

8. Address(s) of the beneficiary(s) along with contact No: \_\_\_\_\_
  - a. Present/Complete mailing address \_\_\_\_\_
  - b. Permanent: \_\_\_\_\_
  - c. Mobile No.: \_\_\_\_\_ E-Mail (if any): \_\_\_\_\_
9. Bank Branch, (nearest to the residence of beneficiaries) \_\_\_\_\_
10. Bank Account title: \_\_\_\_\_ No. \_\_\_\_\_
11. Period of EOL or period for which contributions to Benevolent and Group Insurance Funds was not paid: \_\_\_\_\_

**PART-II**

**CERTIFICATION BY THE HEAD OF DEPARTMENT.**

It is certified that:

1. The information contained in Part-I in respect of Mr./Miss/Mrs. \_\_\_\_\_ is correct according to office record.
2. The above named employee was neither Contingent Paid/Work Charged/Adhoc/Contract employee etc. nor a deputationist from any Provincial/local government and was a regular contributor of BF & GI Funds. Further he/she was neither dismissed nor removed from services (in case of a deputationist from one Federal Government department to another, the case will be prepared by his/her parent department).
3. The employee died during the continuance of service  after retirement
4. The particulars of nominee(s) of Benevolent Grant and sum assured etc. of deceased employee mentioned in Part-I above are correct and there is no other nominee(s) as per record of this office. In case, particulars of nominee(s) given in Part-I found incorrect at later stage by any forum, our department will be responsible for refund of sanctioned grant(s) to BF & GIF.
5. The above claim is prepared for the first time and has not been sent previously from his/her parent department.

Dated. \_\_\_\_\_

Seal and Signature  
Head of the Office/Incharge

### **PART-III**

**Visible and Attested Photocopies on A-4 size paper of the following documents shall be submitted with this application form:**

- a) **Annex “A”**- Last pay certificate/computerized pay slip duly attested by head of department or first and second page of service book or PPO in case of retired person.
- b) **Annex “B”**- CNIC in respect of the aforesaid deceased employee and the prospective beneficiaries and in case of any minor beneficiary, B-Form. (Both sides of CNIC must be copied on A-4 size paper)
- c) **Annex “C”**- Death certificate issued by Union Council/Union Committee/Municipal Committee.
- d) **Annex “D”**- Death Notification/office order of retirement under which name of deceased employee was struck off the strength from service.
- e) **Annex “E”**- Nomination form for pertaining to benevolent fund and group insurance filled in the employee during service.
- f) **Annex “F”**- List of dependent family members i.e. wife/wives, natural son(s), father, mother, minor brothers and unmarried/divorced/widowed sisters/daughters. The list should indicate name, CNIC No. relationship, age, marital status, profession, monthly income, present mailing address and contact number(s).
- g) **Annex “G”**- Four signatures/right and left thumb impressions on separate sheets (four on each sheet) of each beneficiary/dependents duly attested by class-1 Gazetted Officer.
- h) **Annex “H”**- In case of female prospective beneficiaries' one widow/non-marriage/re-marriage certificate attested by a Gazetted officer.