

DYAL SINGH COLLEGE: LODI ROAD: NEW DELHI-110003

FORM OF APPLICATION FOR ADVANCE/FINAL WITHDRAWAL FROM
GENERAL PROVIDENT FUND

(TO BE SUBMITTED TO A/CS DEPTT. DURING 11TH TO 24TH OF THE MONTH)

1. (a) Name of the Subscriber : _____
- (b) Date of Appointment : _____
2. Designation : _____
3. Basic Pay : _____
4. Amount of Advance/Final Withdrawal required : _____
5. Number of Monthly Installment of repayment of Advance : _____
6. Purpose for which the Advance required (Attach Proof) : _____
7. Amount of Advance outstanding if any : _____

I will use the amount for the said purpose and submit the same within _____

I hereby affirm that the reason given above for the Advance/Withdrawal is correct and true.

Date: _____

Signature of Applicant

(TO BE FILLED BY THE ACCOUNT BRANCH)

1. Subscription to the credit of _____
Subscriber as on _____
2. Advance permissible @ _____ % : _____
3. As Required : _____
4. Previous advance outstanding : _____
5. Net amount payable : _____
6. Number of installments : _____
7. Amount of Installments : _____

(In case of Non-Refundable Advance)

Certified that the University rules and regulations have been followed for the loan/withdrawal form P.F Account and the applicant is eligible for the same.

DEALING ASSTT. S.O.ACCOUNT A.O. BURSAR PRINCIPAL

SANCTIONED

TREASURER/CHAIRMAN

Received payment of Rs. _____

Signature of Recipient with revenue stamp _____