FORM 11(Revised)

THE EMPLOYEES PROVIDENT FUND SCHEME, 1952(Paragraph 34) and THE EMPLOYEES PENSION SCHEME, 1995(Paragraph 24)

Declaration by a person taking up employment in the establishment

I	S/O, W/O, Daughter of Shri/Smt		
do l	nereby solemnly declare that:		
(a)	I was employed in M/s		
	(Name and full addre	ess of the establishment)	
witl	n PF A/c No and left service on	prior to that	I was employed in
		with PF A/c No	
fror	mto		
(b)	I was a member of		Provident Fund
	**andalso **but not of the Pension Fund Scheme from	to	and my account
	number(s) was/were/_		
(g) (h)	I am a holder/not holder of Scheme Certificate. Scheme certificate surrendered / not surrendered. TE:		* Signature or left hand thumb impression of the employee.
	(To be filled by the employer only wh	en the person emploved had i	not already
		mployees' Provident Fund)	
		is appointed as	
. ,	(Name of Employee)		(Designation)
ın N	N/s(Name of Fac	tory / Establishment)	
with	n effect from(Date of appointment)		
DA	TE:		nature of the Employer/Manager other authorized officer
**S	trike out whichever is not applicable		

* Left hand impression in the case of illiterate male member and right hand impression by illiterate female member.