	Proforma for application for advance from Provident Funds Ministry of						
				Departmen	partment of/Office		
		Application for	r Advance from-				
						e name of Fund)	
1.	Name of the	subscriber					
2.	Account Number (with Departmental suffix)			
3.	Designation						
4.	Pay				Rs.		
5.	application a (i) Closi Year (ii) Credi Mont (iii) Refun (iv) With	s below— ng balance as p t it fromt hly Subscriptionds. drawals during to	scriber on the da ber statement for oon acco on the period from t	the Rs ount of Rs Rs	5. 5. 5		
6.	for which ad	vance was take of advance take		the purpos		utstanding as	
7.	Amount of a	dvance require	d	Rs	5.		
8.	(a) Purpose f (b) Rules und © If advance	For which the action of the second se	dvance is require equest is covered House Building, n may be given: I measurement o t is freehold or o struction plot being purch Society, the nan location and mea	ed d f the plot n lease ased is ne of the			
	(vi) If the purchase of flat is from DDA or any Housing Board, etc., location, dimension, etc., may be given.					Board, etc.,the	

(d) If advance is required for education of children, following details may be given: -

- (i) Name of son/daughter
- (ii) Class and Institution/College where studying ------
- (iii) Whether a day-scholar or a hostler ------

(e) If advance is required for treatment of ailing family member, following details may be given: -

- (i) Name of the patient and relationship ------
- (ii) Name of the Hospital/Dispensary/Doctor where the patient is Undergoing treatment
- (iii) Whether outdoor/indoor patient ------
- (iv) Whether reimbursement available or not ------

Note:-In case of advance under 8[°] to 8(e), no certificate or documentary evidence would be required.

- 9. Amount of the consolidated advance (Items 6 and 7)and Rs------in number of monthly installments in which the consolidated instalments advance is proposed to be repaid.
- 10. Full particulars of the pecuniary circumstances of the subscriber, justifying the application for the advance.

I certify that particulars given above are correct and complete to the best of my knowledge and belief and that nothing has been concealed by me.

Signature of Applicant Name-----Designation-----Section/Branch------

Dated: -