



शिवाजी विद्यापीठ, कोल्हापूर.

परिपत्रक

1.7./२०२२

प्रस्तावना :-


महाराष्ट्र नागरी सेवा (निवृत्तीवेतन) नियम, १९८२ मधील कलम ११५ (१) नुसार शासकीय कर्मचारी हा, सेवेत कायम झाल्यानंतर नामनिर्देशन करून त्याद्वारे नियम १११ अनुसार अनुज्ञेय होणारे (सेवानिवृत्ती उपदान/मृत्यू उपदान) मिळण्याचा हक्क त्यांच्या कुटुंबीतील एक किंवा अधिक सदस्यांना प्रदान करू शकतो. त्याअनुषंगाने कर्मचार्याने नामनिर्देशन सादर करणे आवश्यक आहे. जर कर्मचा-याने नामनिर्देशन केले नसेल किंवा ते अद्यावत केलेले नसेल तर सेवानिवृत्ती उपदान / मृत्यू उपदान, रजा रोखीकरण, अनुकंपा नियुक्ती किंवा इतर सेवाविषयक, वित्तविषयक लाभ मिळण्याच्या बाबतीत अडचणी निर्माण होऊ शकतात.

परिपत्रक :-

या परिपत्रकाद्वारे विद्यापीठातील शिक्षकेत्तर कर्मचा-यांना कळविण्यात येते की, त्यांनी विहित नमुन्यातील नामनिर्देशन सादर करावेत. जेणेकरून सेवानिवृत्ती उपदान / मृत्यू उपदान, रजा रोखीकरण, अनुकंपा नियुक्ती किंवा इतर सेवाविषयक, वित्तविषयक लाभ मिळण्याच्या बाबतीत अडचणी निर्माण होणार नाहीत. सदर नामनिर्देशन सादर करताना -

१. विहित नमुन्यातील नामनिर्देशन सादर करावे. विहित नमूना विद्यापीठ संकेतस्थळावर उपलब्ध करून देण्यात आला आहे.
२. नामनिर्देशित व्यक्तीच्या ओळखीचा / जन्म तारखेचा पुरावा म्हणून पुर्ण जन्मतारखेची नोंद असलेल्या कोणत्याही दोन कागदपत्रांच्या छायांकित प्रती सोबत जोडाव्यात.
३. नामनिर्देशन नमुन्यातील सर्व माहिती बिनचुक, सुवाच्च हस्ताक्षरात भरावी व दोन सहका-यांची साक्षीदार म्हणून स्वाक्षरी घ्यावी.
४. सदरची सर्व माहिती शनिवार दिनांक १५ मे, २०२२ पर्यंत या कार्यालयास सादर करावी.

सर्व अधिविभागप्रमुख व प्रशासकीय विभागप्रमुख यांना कळविण्यात येते की, त्यांनी सदर परिपत्रक त्यांच्या अधिनस्थ शिक्षक / अधिकारी / कर्मचा-यांच्या निदर्शनास आणून द्यावे.


प्र-कुलसचिव

जा.क्र. आस्थापना/९८३

दिनांक :- 21 APR 2022

प्रति,

- १) सर्व अधिविभागप्रमुख, संचालक, समन्वयक, शिक्षक, प्रशासकीय अधिकारी व सेवक
- २) मा.कुलगुरू, मा.प्र-कुलगुरू, मा. कुलसचिव, मा. संचालक परीक्षा व मुल्यमापन मंडळ, मा. वित्त व लेखा अधिकारी, यांचे कार्यालयास
- ३) इंटरनेट विभाग - सदरचे परिपत्रक विद्यापीठ संकेत स्थळावर प्रसिध्द करावे.
- यांना माहितीसाठी व पुढील योग्य त्या कार्यवाहीसाठी.

FORM No. 1**[See Rule 115 (1)]****Nomination for Death-cum-Retirement Gratuity**

When the Employee has a family and wishes to nominate one member, or more than one member, thereof.

Ihereby Nominate the person/persons mentioned below who is/are member(s) of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Government of Maharashtra in the event of my death while in service and the right to receive on my death, to the extent specified below, any gratuity which having become admissible to me on retirement may remain unpaid at my death :

| Original Nominee(s) | | | | Alternate Nominee(s) | |
|--|--------------------------------|-----|--|--|--|
| Name(s) and address(s) Nominee/Nominees | Relationship with the Employee | Age | Amount of share of gratuity payable to each. | Name, address, relationship and age of the person or persons, if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Employee or the nominee dying after the death of the Employee but before receiving payment of gratuity. | Amount of share of gratuity payable to each**. |
| 1 | 2 | 3 | 4 | 5 | 6 |
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* This column should be filled in so to cover the whole amount of the gratuity.

** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original Nominee(s)

This nomination supersedes the Nomination made by me earlier which stands cancelled.

Note:- (i) The Employee shall draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this at

Witnesses to Signature :

1.

2.

Signature of the Employee

(To be filled in by the Head of Office)

Nomination by

Designation :

Office :

Shivaji University, Kolhapur-416 004

Signature of Head of Office

Date:.....

Designation.....

FORM No. 2**[See Rule 115 (1)]****Nomination for Death-cum-Retirement Gratuity**

When the Employee has a family and wishes to Nominate one member, or more than one member, thereof.

Ihereby nominate the person/persons mentioned below who is/are member(s) of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Government of Maharashtra in the event of my death while in service and the right to receive on my death, to the extent specified below, any gratuity which having become admissible to me on retirement may remain unpaid at my death :

| Original nominee(s) | | | | Alternate nominee(s) | |
|--|--------------------------------|-----|--|--|--|
| Name(s) and address(s) Nominee/Nominees | Relationship with the Employee | Age | Amount of share of gratuity payable to each. | Name, address, relationship and age of the person or persons, if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Employee or the nominee dying after the death of the Employee but before receiving payment of gratuity. | Amount of share of gratuity payable to each**. |
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

* This column should be filled in so to cover the whole amount of the gratuity.

** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original nominee(s)

This nomination supersedes the nomination made by me earlier which stands cancelled.

Note:- (i) The Employee shall draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this at

Witnesses to Signature :

1.
2.

Signature of the Employee

(To be filled in by the Head of Office)

Nomination by

Designation :

Office :

Shivaji University, Kolhapur-416 004

Signature of Head of Office

Date:.....

Designation.....

Note:- The Employee is advised that it would be in the interest of his/her Nominees if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his/her death.

DETAILS OF FAMILY

Details of the members of my family* as on

| Sr. No. | Name of the Members of family* | Date of Birth | Relationship with the Employee | Signature of the Head of Office | Remarks |
|---------|--------------------------------|---------------|--------------------------------|---------------------------------|---------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office any addition or alternation.

Place:.....

Date :

Signature of the Employee

*Family for this purpose means family as defined in Clause (b) of sub-rule (16) of rule 116 of Maharashtra Civil Services (Pension) Rules, 1982.

Note:- The Employee is advised that it would be in the interest of his/her nominees if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his/her death.

FORM No. 4
[See Rule 117 (17)]
Nomination for Family Pension. 1950

I here by nominate the person (s) mentionner below, who is/are member(s) of my family, to receive in the order shown below the family Pension. 1950 which may be granted by the Government of Maharashtra in the event of my death after completion of ten years qualifying service,

| Name(s) and address(s) of nominees | Relationship with the Employee | Age | Whether married or unmarried |
|---------------------------------------|-----------------------------------|-----|---------------------------------|
| 1 | 2 | 3 | 4 |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |

Note:- The Employee should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this at

Witnesses to Signature :

1.

2.

Signature of the Employee

Designation

(To be filled in by the Head of Office)

Nomination by

Designation :

Signature of Head of Office

Date:.....

Office :

Shivaji University, Kolhapur-416 004

Designation.....

FORM - 2**[Rule 57 (3)]**

P. F. Account No. See

**Maharashtra Non-Agricultural Universities/Affiliated and Aided
Non-Government Colleges Provident Fund Rules****Forms of Nomination**

1. When the Non-teaching employees has a family and wishes to Nominate one member there of.

I hereby nominate the person mentioned below who is a member of my family as defined in rule 2 (12) of the Maharashtra Non-Agricultural Universities/Affiliated and Aided Non-Government Colleges Provident Fund Rules, 1985, applicable to me, to receive the amount that may stand to my credit in the fund, in the event of my death before that amount has become payable, or having become payable has not been paid:

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Contingencies on happening of which the Nomination shall become invalid | Name, address and relationship of the person or persons, if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|-----------------------------|------------------------------|----------------|---|--|
| 1 | 2 | 3 | 4 | 5 |
| | | | | |

Dated this _____ day of _____ 20

at

Two Witnesses to Signature

Signature of employee

1.

2.

P. F. Account No.

II. When the employees has a family and wishes to nominate more than one member thereof.

I hereby Nominate, the persons mentioned below, who are members of my family as defined in Rule 2 (12) of the Maharashtra Non-Agricultural Universities/Affiliated and Aided Non-Government Colleges Provident-Fund Rules to receive the amount that may stand to my credit in the Fund in the event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their name:

| Name and address of Nominees | Relationship with Subscriber | Age of Nominee | Amount of share of accumulation to be paid to each | Contingency on the happening of which the nomination shall become invalid | Name, address and relationship of the person or persons if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|------------------------------|------------------------------|----------------|--|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

Dated this _____ day of _____ 20

at

Two witnesses to Signature

1.

2.

Signature of employee

(2)

P. F. Account No.

III, When the employee has no family and wishes to nominate one person.

I having no family as defined in rule 2 (12) of the Maharashtra Non-Agricultural Universities/ Affiliated and Aided Non-Government Colleges provident Fund Rules hereby nominate the persons mentioned below to receive the amount that may stand to my credit in the Fund in the Event to my death before that amount has become payable, or having become payable has not been paid :

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Contingency of happening of which the Nomination shall become invalid | Name, address and relationship of the person or persons, if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|-----------------------------|------------------------------|----------------|---|--|
| 1 | 2 | 3 | 4 | 5 |
| | | | | |

Dated this _____ day of _____ 20____
at _____

Two Witnesses to Signature

- 1.
- 2.

Signature of employee

P. F. Account No.

IV. When the employees has a family and wishes to nominate more than one person thereof.

I having no family as defined in Rule 2 (12) of the Maharashtra Non-Agricultural Universities Affiliated and Aided Non-Government Colleges Provident-Fund Rule hereby nominate the persons mentioned below to receive the amount that may stand to my credit in the Fund in the event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their names:

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Amount of share of accumulation to be paid to each | Contingency of happening of which the nomination shall become invalid | Name, address and relationship of the person or persons if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|-----------------------------|------------------------------|----------------|--|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

Dated this _____ day of _____ 20____
at _____

Two witnesses to Signature

- 1.
- 2.

Signature of employee

Jobs/A-1

FORM No. 1

[See Rule 115 (1)]

Nomination for Death-cum-Retirement Gratuity

When the Employee has a family and wishes to nominate one member, or more than one member, thereof.

I VIJAY GOVIND PATIL hereby Nominate the person/persons mentioned below who is/are member(s) of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Government of Maharashtra in the event of my death while in service and the right to receive on my death, to the extent specified below, any gratuity which having become admissible to me on retirement may remain unpaid at my death :

| Original Nominee(s) | | | | Alternate Nominee(s) | |
|--|--------------------------------------|------------|---|---|--|
| Name(s) and address(s) Nominee/Nominees | Relationship with the Employee | Age | Amount of share of gratuity payable to each. | Name, address, relationship and age of the person or persons, if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Employee or the nominee dying after the death of the Employee but before receiving payment of gratuity. | Amount of share of gratuity payable to each**. |
| 1 | 2 | 3 | 4 | 5 | 6 |
| MRS. RUPALI VIJAY PATIL At./Po. M. Sangaon Tal.- Kagal Dist- Kolhapur. | Wife | 39 yrs. | 100% | Master VIVEK VIJAY PATIL At./Po. - M. Sangaon Tal - Kagal Dist - Kolhapur. | |

* This column should be filled in so to cover the whole amount of the gratuity.

** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original Nominee(s)

This nomination supersedes the Nomination made by me earlier which stands cancelled.

Note:- (i) The Employee shall draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this 26th April, 2022 at Kolhapur.

Witnesses to Signature :

1.
2.

Signature of the Employee

(To be filled in by the Head of Office)

Nomination by

Designation :

Office :

Shivaji University, Kolhapur-416 004

Signature of Head of Office

Date:.....

Designation.....

FORM No. 2

[See Rule 115 (1)]

Nomination for Death-cu-Retirement Gratuity

When the Employee has a family and wishes to Nominate one member, or more than one member, thereof.

I VIJAY GAYIND PATIL hereby nominate the person/persons mentioned below who is/are member(s) of my family, and confer on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Government of Maharashtra in the event of my death while in service and the right to receive on my death, to the extent specified below, any gratuity which having become admissible to me on retirement may remain unpaid at my death :

| Original nominee(s) | | | | Alternate nominee(s) | |
|--|--------------------------------|-----------|--|--|--|
| Name(s) and address(s) Nominee/Nominees | Relationship with the Employee | Age | Amount of share of gratuity payable to each. | Name, address, relationship and age of the person or persons, if any, to whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Employee or the nominee dying after the death of the Employee but before receiving payment of gratuity. | Amount of share of gratuity payable to each**. |
| 1 | 2 | 3 | 4 | 5 | 6 |
| MRI. RUPALI VIJAY PATIL A/p. M. Sangaon Tal. Kagal Dist - Kolhapur | Wife | 39 yrs | 100%. | Master VIVEK VIJAY PATIL Address as per Column No 1 | 100%. |

* This column should be filled in so to cover the whole amount of the gratuity.

** The amount/share of the gratuity shown in this column should cover the whole amount/share payable to the original nominee(s)

This nomination supersedes the nomination made by me earlier which stands cancelled.

Note:- (i) The Employee shall draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

(ii) Strike out which is not applicable.

Dated this 20th April, 2022 at Kolhapur

Witnesses to Signature :

1.
2.

Signature of the Employee

(To be filled in by the Head of Office)

Nomination by

Designation :

Office :

Shivaji University, Kolhapur-416 004

Signature of Head of Office

Date:.....

Designation.....

Note:- The Employee is advised that it would be in the interest of his/her Nominees if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his/her death.

FORM No. 3

[See Rule 116 (14)]

DETAILS OF FAMILY

Name of the Employee VIJAY GOVIND PATIL
Designation Senior Assistant
Date of Birth 22-07-1979
Date of Appointment 17-04-2001
Details of the members of my family* as on

| Sr. No. | Name of the Members of family* | Date of Birth | Relationship with the Employee | Signature of the Head of Office | Remarks |
|---------|--------------------------------|---------------|--------------------------------|---------------------------------|---------|
| 1 | 2 | 3 | 4 | 5 | 6 |
| 1. | MRS RUPALI VIJAY PATIL | 28/8/1983 | Wife | | |
| 2. | Mrs. VIVEK VIJAY PATIL | 15/5/2004 | Son | | |

I hereby undertake to keep the above particulars up-to-date by notifying to the Head of Office any addition or alternation.

Place: Kolhapur

Date : 26th April, 2022

Signature of the Employee

*Family for this purpose means family as defined in Clause (b) of sub-rule (16) of rule 116 of Maharashtra Civil Services (Pension) Rules, 1982.

Note:- The Employee is advised that it would be in the interest of his/her nominees if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his/her death.

FORM No. 4

[See Rule 117 (17)]

Nomination for Family Pension, 1950

I VIJAY GOVIND PATIL here by nominate the person (s) mentionner below, who is/are member(s) of my family, to receive in the order shown below the family Pension, 1950 which may be granted by the Government of Maharashtra in the event of my death after completion of ten years qualifying service,

| Name(s) and address(s) of nominees | Relationship with the Employee | Age | Whether married or unmarried |
|--|--------------------------------|--------------------------|------------------------------|
| 1 | 2 | 3 | 4 |
| <u>MRS. RUPALI VIJAY PATIL.</u> <u>Alp. M. Sangam</u> <u>Tal- Kagal</u> <u>Dist- Kolhapur</u> | <u>Wife</u> | <u>39</u> <u>Yrs.</u> | |

Note:- The Employee should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this 26th April, 2022 at Kolhapur

Witnesses to Signature :

1.

2.

Signature of the Employee

Designation

(To be filled in by the Head of Office)

Nomination by

Designation :

Office :

Shivaji University, Kolhapur-416 004

Signature of Head of Office

Date:.....

Designation.....

FORM - 2

[Rule 57 (3)]

P. F. Account No. See

**Maharashtra Non-Agricultural Universities/Affiliated and Aided
Non-Government Colleges Provident Fund Rules****Forms of Nomination**

1. When the Non-teaching employees has a family and wishes to Nominate one member there of.

I hereby nominate the person mentioned below who is a member of my family as defined in rule 2 (12) of the Maharashtra Non-Agricultural Universities/Affiliated and Aided Non-Government Colleges Provident Fund Rules, 1985, applicable to me, to receive the amount that may stand to my credit in the fund, in the event of my death before that amount has become payable, or having become payable has not been paid:

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Contingencies on happening of which the Nomination shall become invalid | Name, address and relationship of the person or persons, if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|---|------------------------------|----------------|---|--|
| 1 | 2 | 3 | 4 | 5 |
| Mrs. RUPALI VIJAY PATIL *lp M. Sangam Tal. Kagal Dist. Kolhapur | Wife | 39 Yrs | Death | Mrs. VIVER VIJAY PATIL - Son Age - 18 Yrs. Address at prn Col. No.1 |

Dated this 20th April, day of 2022
at

Two Witnesses to Signature

Signature of employee

1.

2.

P. F. Account No.

II. When the employees has a family and wishes to nominate more than one member thereof.

I hereby Nominate, the persons mentioned below, who are members of my family as defined in Rule 2 (12) of the Maharashtra Non-Agricultural Universities/Affiliated and Aided Non-Government Colleges Provident-Fund Rules to receive the amount that may stand to my credit in the Fund in the event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their name:

| Name and address of Nominees | Relationship with Subscriber | Age of Nominee | Amount of share of accumulation to be paid to each | Contingency on the happening of which the nomination shall become invalid | Name, address and relationship of the person or persons if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|------------------------------|------------------------------|----------------|--|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

Dated this day of 20
at

Two witnesses to Signature

1.

2.

Signature of employee

(2)

P. F. Account No.

III, When the employee has no family and wishes to nominate one person.

I having no family as defined in rule 2 (12) of the Maharashtra Non-Agricultural Universities/ Affiliated and Aided Non-Government Colleges provident Fund Rules hereby nominate the persons mentioned below to receive the amount that may stand to my credit in the Fund in the Event to my death before that amount has become payable, or having become payable has not been paid :

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Contingency of happening of which the Nomination shall become invalid | Name, address and relationship of the person or persons, if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|-----------------------------|------------------------------|----------------|---|--|
| 1 | 2 | 3 | 4 | 5 |
| | | | | |

Dated this _____ day of _____ 20

at

Signature of employee

Two Witnesses to Signature

1.

2.

P. F. Account No.

IV. When the employees has a family and wishes to nominate more than one person thereof.

I having no family as defined in Rule 2 (12) of the Maharashtra Non-Agricultural Universities Affiliated and Aided Non-Government Colleges Provident-Fund Rule hereby nominate the persons mentioned below to receive the amount that may stand to my credit in the Fund in the event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their names:

| Name and address of Nominee | Relationship with Subscriber | Age of Nominee | Amount of share of accumulation to be paid to each | Contingency of happening of which the nomination shall become invalid | Name, address and relationship of the person or persons if any to whom the right of the Nominees shall pass in the event of his predecesing the employee. |
|-----------------------------|------------------------------|----------------|--|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 |
| | | | | | |

Dated this _____ day of _____ 20

at

Two witnesses to Signature

1.

2.

Signature of employee

Jobs/A-1