

**FORMAT - 1**

..... **BANK**  
**Head Office:** ..... , **Dist.** .....

**Option Form to be filled in by the employees who are in service of the Bank**  
**(To be submitted in quadruplicate through their present Branch / Office)**

Date of receipt of application at Branch / Office		<b>FOR HO USE ONLY</b>
Forwarded on		
Forwarded by		
Signature with office seal (Branch/Office)		<b>(Signature of the concerned Authority at HO with date)</b>

The Chairman  
..... Bank  
Head Office

Date: \_\_\_\_\_

I hereby declare that I have read and understood the ..... Bank (Employees') Pension Regulations, 2018 and I hereby opt to become a member of the Bank's Pension Scheme and irrevocably authorise the Bank / EPF Trustees / EPFO / RPFC to transfer the entire contribution of the Bank along with the interest thereon to the credit of Pension Fund to be created for this purpose. I understand that I am required to contribute to the Provident Fund Account at the rates determined by the Bank from time to time. I further understand that with effect from \_\_\_\_\_ (the date of implementation of Pension Scheme), the Bank shall not make any contribution to my Provident Fund Account. I also undertake to refund my non-refundable withdrawal from EPF balance (Bank's contribution component), if any, together with interest at EPF rate from time to time up to the date of refund.

- Signature : \_\_\_\_\_
- Name in Full (in Block letters): \_\_\_\_\_
- Designation: \_\_\_\_\_
- E P F No: \_\_\_\_\_
- Present Residential Address: \_\_\_\_\_  
\_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Date of joining in the Bank' service: \_\_\_\_\_
- Present place of posting: \_\_\_\_\_ Branch / Office.

**(Signature to be attested by the Branch/Office Head with Office Seal)**