KERALA UNIVERSITY OF HEALTH SCIENCES

FORM D

[*See* rules 14 & 37(1) of General Provident Fund (Kerala) rules]

FORM OF APPLICATION FOR TEMPORARY ADVANCES AGAINST DEPOSITS IN KERALA UNIVERSITY OF HEALTH SCIENCES EMPLOYEES'PROVIDENT FUND

1. Name and Account Number of the subscriber :
2. Designation and Employee ID :
3. Basic pay :
4. Amount of advance required : (both in figures and words)
5. Purpose of which it is required :
6. Number of instalments of recovery proposed :
7. Date of complete repayment of the previous loan :
8. Details of advances pending recovery :—
   (1) number and date of the order granting previous advance :
   (2) the amount of previous advance :
   (3) date of drawal of previous advance :
   (4) balance outstanding :
9. Amount of consolidated advance [sum of items 4 and 8 (4)] and the number and amount of monthly instalments in which the consolidated advance is proposed to be repaid
10. Name of treasury/ bank at which payment is desired

11. I hereby declare that the above statements are true and that I agree to abide by the General Provident Fund (Kerala) Rules in force. I also promise to repay the above advance in equal monthly instalments according to Rules.

Signature of the subscriber
with name and designation

Place :

Date :

12. **Enquiry Certificate**

Signature of Head of Department or Office

Place :
Date :

VERIFICATION REPORT

13. Total amount at the credit of the applicant :
14. Amount of advance admissible :
15. Number of instalments of repayment :
16. Any other fact requiring consideration :

Finance officer