

ASSAM PENSION SCHEME FOR JOURNALISTS

APPLICATION FORM
(To be filled up in English only)

The Director,
Information & Public Relations,
Government of Assam
Dispur, Guwahati-781006

Paste your recent
Passport size
Coloured
Photograph

Sir,

With reference to the relevant notification, I present myself as an applicant to avail the benefit of 'The Assam Pension Scheme for Journalists'.

[A] INTRODUCTION

1. NAME OF THE APPLICANT *(In capital letters only)*

2. FATHER'S NAME *(In capital letters only)*

3. DATE OF BIRTH

D	D	M	M	Y	Y	Y	Y

4. AGE AS ON 1ST DAY OF APRIL, 2024

Y	Y	M	M	D	D

5. DATE OF ATTAINING 60 (SIXTY) YEARS OF AGE:

D	D	M	M	Y	Y

6. GENDER (*Please tick the applicable one*) Male Female

7. NATIONALITY:

8. IN PROFESSIONAL JOURNALISM SINCE/...../.....

9. MAIN MEDIUM (*Please tick the applicable one*):

PRINT / ELECTRONIC / NEWS AGENCY

10. LANGUAGE(S) YOU REPORTED IN.....

11. DETAILS OF PREVIOUS APPOINTMENTS HELD :

SI No	ORGANIZATION	YEAR OF APPOINTMENT	THE DESIGNATION (JOURNALIST /CAMERAPERSON/ CORRESPONDENT /PHOTO JOURNALIST)	PROFESSIONAL EXPERIENCE CERTIFICATE FROM THE HOUSE TO BE ATTACHED

12. NAME OF ORGANIZATION FROM WHERE RETIRED:

13. DESIGNATION OF THE LAST POST HELD:

14. PRESS ACCREDITATION/RECOGNITION CARD NO ISSUED BY THE DIRECTORATE OF INFORMATION & PUBLIC RELATIONS, ASSAM (*ENCLOSE PHOTOCOPY*)

15. BRIEF OF ANY OTHER INFORMATION/AWARD(S)/RECOGNITION RECEIVED
(COPY TO BE ENCLOSED)

.....
.....

16. ARE YOU DRAWING PENSION FROM ANY OTHER SOURCES EXCEPT E.P.F.
(EMPLOYEES PROVIDENT FUND): Yes/NO

17. WHETHER ANY PENSION FROM EMPLOYEES PROVIDENT FUND IS DRAWN:
YES/NO

(IF YES, PLEASE FURNISH)

a) AMOUNT OF PENSION :

b) PENSION SANCTION AUTHORITY :

18. BANK DETAILS

BANK ACCOUNT NO.																				
NAME OF THE BANK																				
BRANCH ADDRESS																				
IFSC CODE NO.																				
PAN CARD NO.																				
NAME OF THE TREASURY																				

[B] CONTACT DETAILS *(In capital letters only)*

a. PRESENT ADDRESS.....

.....

.....

.....PIN.....

b. PERMANENT ADDRESS.....

.....

.....
.....PIN.....

c. MOBILE NO(S).....

d. E-MAIL ID.....

e. EMERGENCY CONTACT PERSON

NAME:.....

RELATIONSHIP:.....

CONTACT NO(S).....

Self Declaration & Undertaking

I do hereby declare that the information provided in my application is accurate, complete and true. I authorize the Director of Information & Public Relations, Assam to verify any aspect of my application and/or my credentials. I understand and agree that any inaccurate information, misleading information, or omission of a material nature relevant to the application will be liable to be rejected.

Further, I also declare that I am not drawing pension from any other sources except e.p.f. (employee's provident fund)

Date.....

Signature of the Applicant

Place.....