**Birbal Sahni Institute of Palaeosciences, Lucknow**

**Nomination for Death-cum Retirement Gratuity**

When the Government servant **Has a Family** and wishes to nominate one member or more than one member, thereof

I ........................................................................ hereby nominate the person/persons mentioned below who is/ are member(s) of my family, and confer on him on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Central Government 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 and address of Nominee/ Nominees | Relationship with  Government Servant | Age | Amount of share of gratuity payable to each \* | Name, Address, Relationship and age of the person or persons if any, or whom the right conferred on the nominee shall pass in the event of the nominee predeceasing the Government Servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity | Amount of share of gratuity payable to each \*\* |
| 1 | 2 | 3 | 4 | 5 | 6 |
|  |  |  |  |  |  |

This nomination supersede the nomination made by me earlier on ........................................... which stands cancelled.

Note: (i) The Government servant shall draw lines across the 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 .................................. day of ..............................20 at ..............................................

Witness to Signature

.................................... Signature of Government Servant

**Birbal Sahni Institute of Palaeosciences, Lucknow**

**Nomination for Death-cum Retirement Gratuity**

When the Government servant **Has No Family** and wishes to nominate one member or more than one member, thereof

I ........................................................................ having no family, hereby nominate the person/persons mentioned below and confer on him/them the right to receive, to the extent specified below, any gratuity that may be sanctioned by the Central Government 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 and address of Nominee/ Nominees | Relationship with  Government Servant | Age | Amount of share of gratuity payable \* | Name, Address, Relationship and age of the person or persons if any, to whom the right conferred on the nominee predeceasing the Government Servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity | Amount of share of gratuity payable to each \*\* |
| 1 | 2 | 3 | 4 | 5 | 6 |
|  |  |  |  |  |  |

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

Note: (i) The Government servant should draw lines across the 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 .................................. day of ..............................20 at ..............................................

Witness to Signature

1. .................................... Signature of Government Servant

2. ...........................................

(To be filled in by the Head of Office/Audit Officer)

Nomination by ........................... Signature of Head of Office/Audit Officer

Designation ................................ Date ................................

Office ........................................ Designation ................................

\* This column should be filled in so as 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)