



सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Government of India

करार बोर्ड COIR BOARD

एम. जी. रोड, कोच्ची 682016
दूरभाष: +91 484 2351900
फैक्स: +91 484 2370034

M.G. Road, Kochi - 682016
Tel: +91-484-2351900
Fax: +91-484-2370034

ई मेल/ Email :info@coirboard.org
वेब / Web:www.coirboard.gov.in

सं.ए-59/153/2018-प्रशा. (कार्मिक)

दिनांक: 10.11.2022

परिपत्र

विषय:- सर्विस बुक अपडेशन -सं.

सर्विस बुक/व्यक्तिगत डेटा अपडेशन के एक भाग के रूप में, सभी कर्मचारियों/अधिकारियों से अनुरोध है कि वे निम्नलिखित प्रस्तुत करें:

1. नवीनतम पासपोर्ट आकार का फोटो (फोटो के पीछे नाम और कर्मचारी कोड लिखा होना चाहिए)
2. परिवार का विवरण
3. फैमिली पेंशन के लिए नामांकन
4. सामान्य भविष्य निधि के लिए नामांकन
5. मृत्यु सह सेवानिवृत्ति उपदान के लिए नामांकन
6. सेवा विवरण का विवरण
7. आवासीय पते में परिवर्तन, यदि कोई हो (समर्थक दस्तावेजों के साथ)
8. आधार की प्रति

उपरोक्त विवरण भरने के लिए प्रारूप (क्रमांक 2 से 6) संलग्न हैं। हमारी वेब साइट www.coirboard.gov.in से भी डाउनलोड किया जा सकता है (मेनू > फॉर्म पर भी क्लिक करें)। सभी से अनुरोध है कि 30.11.2022 के पहले अधोहस्ताक्षरी को आवश्यक विवरण यथाशीघ्र प्रस्तुत करें।

सहायक निदेशक (रा.भा.) / प्रशासन (प्र.)

संलग्नक: ऊपरोक्त

सेवा में,

1. मुख्यालय के सभी कर्मचारियों/अधिकारियों
2. सभी शोरूम/उप कार्यालय शोरूम/उप कार्यालयों के प्रमुखों से अनुरोध है कि वे अपने अधीनस्थों के संबंध में विवरण एकत्र करें और मुख्यालय को भेजें।
3. स्टॉक फाइल
4. ई-ऑफिस नोटिस बोर्ड
5. बोर्ड की वेबसाइट



सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Government of India

कपड़ा बोर्ड COIR BOARD

एम. जी. रोड, कोच्चि 682016
दूरभाष: +91 484 2351900
फैक्स: +91 484 2370034
M.G. Road, Kochi - 682016
Tel:+91-484-2351900
Fax: +91-484-2370034
ई मेल Email :info@coirboard.org
वेब / Web:www.coirboard.gov.in

No.A-59/153/2018-ADM(PERSONNEL)

Date: 10.11.2022

CIRCULAR

Sub:- Service Book updation – Reg.

As a part of Service Book/ personal data updation, all employees/officers are requested to furnish the following:

1. Latest passport size photograph
(Name & Employee code should be written on the back side of the photograph)
2. Details of Family
3. Nomination for Family pension
4. Nomination for General Provident Fund
5. Nomination for Death Cum Retirement Gratuity
6. Details of service particulars
7. Change of residential address, if any (with supporting documents)
8. Copy of Aadhar

The formats for filling up the above details (Sl.No.2 to 6) are attached. The forms can be downloaded from our web site www.coirboard.gov.in (click the menu > FORMS) too. All are requested to furnish the required details to the undersigned at the earliest, but not later than 30.11.2022.

सहायक निदेशक (रा.भा)/

ASSISTANT DIRECTOR (O.L.),

प्रशासन (प्र)/ADMINISTRATION (I/C).

Encl: as above.

To,

1. All Employees/Officers in Head Office
2. All Showrooms/Sub Offices. The head of Showrooms/Sub Offices are requested to collect the details in respect of their sub-ordinates and forward to HO
3. Stock file.
4. E-Office Notice Board.
5. Board's website.



कयर बोर्ड
COIR BOARD
(सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Govt. of India)

कॉयर हाउस / Coir House,
एम.जी रोड/ M.G. Road,
कोच्ची / Kochi 682 016
दूर भाष/Tel : +91-484-2351807/
2351788/2351954
फैक्स/Fax : +91-484-2370034/2354397
ई-मेल/e-mail : coirboard@nic.in
वेब/Web:info@coirboard.org

FORM 3
See Rule 54 (12)
DETAILS OF FAMILY

1. Name of the Government Servant :
2. Designation :
3. Date of Birth :
4. Date of appointment :
5. Details of the members of my family* as on is as follows:

Sl. No.	Name of the members of family*	Date of Birth	Relationship with the officer	Initials of the Head of Office	Remarks
1	2	3	4	5	6
1.					
2.					
3.					
4.					
5.					

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

Place :

Date :

Signature of the Govt. servant

*Family for this purpose means family as defined in clause(b) of sub-rule(14) of Rule 54 of C.C.S (Pension) Rules 1972.

NOTE: Wife and husband shall include respectively judicially separated wife and husband.



कयर बोर्ड
COIR BOARD
(सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Govt. of India)

कायर हाउस /Coir House,
एम.जी.रोड/ M.G. Road,
कोरची /Kochi 682 016
दूर भाष/Tel : +91-484-2351807/
2351788/2351954
फैक्स/Fax : +91-484-2370034/2354397
ई-मेल/e-mail :coirboard@nic.in
वेब/Web:info@coirboard.org

FORM 4
See Rule 55(7)

NOMINATION FOR FAMILY PENSION, 1950

I, nominate the persons mentioned below, who are members of my family to receive in the order shown below the Family Pension,1950 which may be granted by the Central Government in the event of death after completion of ten years qualifying service.

Name & Address of nominee	Relationship with the Govt. servant	Age	Whether married or unmarried

This nomination supersedes the nomination made by me earlier.

NOTE: The Government servant should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this..... day of 20..... at.....

(Signature with Name and Designation)

Witness to signature:

1.
2.

Signature of Govt. servant

Name and Designation

(To be filled by the Head Office)

Nomination by Signature of Head of Office
Designation Dated
Office Designation



कयर बोर्ड
COIR BOARD
(सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Govt. of India)

कायर हाउस / Coir House,
एम.जी.रोड / M.G. Road,
कोच्ची / Kochi 682 016
दूर भाष / Tel : +91-484-2351807/
2351788/2351954
फैक्स / Fax : +91-484-2370034/2354397
ई-मेल / e-mail : coirboard@nic.in
वेब / Web : info@coirboard.org

FIRST SCHEDULE

By-law 6(3)

Subscriber's Name : Shri./Smt.
Depositor Account No. :
Nomination Register Folio No. :

SUBSCRIBER'S NOMINATION

I. When the subscriber has a family and wishes to nominate one member thereof.

I hereby nominate the person mentioned below who is a member of my family as defined in By-law 2 of the Coir Board General Provident Fund By-laws, 1977 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:

1. Name and address of the nominee
in the event of subscribers death :

2. Relationship with the subscriber:

3. Age

4 Name address, and relationship of
person or persons, if any, to whom the
right of the nominee shall pass in the
event of his pre-deceasing the subscriber :

Dated this day of.....20..... at

Signature of the subscriber:

Designation:

Address:

Signature of two witness with addresses:

(1)

(2)

N.B:

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column 4 should be filled in as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

Subscriber's Name : Shri/Smt.
 Depositors Account No :
 Nomination Register Folio No.

SUBSCRIBER'S NOMINATION

II. When the subscriber 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 the By-law 2 of the Coir Board General Provident Fund By-laws, 1977 to received the amount that may stand to my credit in the Fund in the event of 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 nominees in the event of the subscriber's death		Relationship with subscriber	Age	Amount of share of accumulation to be paid to each
1		2	3	4
5.	Contingencies on the happening of which the nomination shall become invalid			
6.	Name, addresses and relationship of the person or persons, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the subscriber			

Dated this..... day of 20..... at

Signature of the subscriber

Designation

Address

Signature of two witnesses with address:

(1)

(2)

N.B.:

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

Subscriber's Name : Shri/Smt.
 Depositors Account No :
 Nomination Register Folio No.

SUBSCRIBER'S NOMINATION

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

I having no family as defined in the By-law 2 of the Coir Board General Provident Fund By-laws, 1977, hereby nominate the person 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:-

Name and address of nominee	Relationship with subscriber	Age
1	2	3
4.	**Contingencies on the happening of which the nomination shall become invalid	
5.	Name, addresses and relationship of the person or persons, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the subscriber	

Dated this..... day of 20..... at

Signature of the subscriber:
 Designation:
 Address:

Signature of two witnesses with address:

- (1)
- (2)

(**)NOTE:- Where as subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

N.B.

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.

Subscriber's Name : Shri/Smt.
 Depositors Account No :
 Nomination Register Folio No.

SUBSCRIBER'S NOMINATION

IV. When the subscriber has no family and wishes to nominate more than one person.

I having no family as defined in the By-law 2 of the Coir Board General Provident Fund By-laws, 1977, 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 not been paid and directed that the said amount shall be distributed among the said persons in the manner shown below against their names:

Name and address of nominees in the event of the subscriber's death		Relationship with subscriber	Age	*Amount of share of accumulation to be paid to each
1			3	4
5. Contingencies on the happening of which the nomination shall become invalid				
6. Name, addresses and relationship of the person or persons, if any, to whom the right of the nominee shall pass in the event of his pre-deceasing the subscriber				

Dated this..... day of 20..... at

Signature of the subscriber:
 Designation:
 Address:

Signature of two witnesses with address:

- (1)
- (2)

()NOTE:-** Where as subscriber who has no family makes a nomination, he shall specify in this column that the nomination shall become invalid in the event of his subsequently acquiring a family.

N.B.

The subscriber should draw lines across the blank space below his last entry to prevent insertion of any names after he has signed.

Column No.4 should be filled in so as to cover the whole amount that may stand to the credit of the subscriber in the Fund at any time.



कॉयर् बोर्ड
COIR BOARD
(सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Govt. of India)

कॉयर् हाउस / Coir House,
एम.जी.रोड / M.G. Road,
कोच्चि / Kochi 682 016
दूर भाष/Tel : +91-484-2351807/
2351788/2351954
फैक्स/Fax : +91-484-2370034/2354397
ई-मेल/e-mail : coirboard@nic.in
वेब/Web:info@coirboard.org

FORM 1

See Rule 53(1)

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.

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 the payment of which may be authorized 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				Alternative nominee (s)	
Name(s) & address(es) of the nominee/nominees	Relationship with the Govt. Servant	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 pre-deceasing the Government servant or the nominee dying after the death of the Government servant but before receiving payment of gratuity	Amount or share of gratuity payable to each**
1	2	3	4	5	6

* 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).

Strike out whichever is not applicable.

This nomination supersedes the nomination made by me earlier.

NOTE: 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.

Dated this Day of 20..... at

Witness to signature :

Name & Designation

1.
2.

Signature of Govt. servant:

Name & Designation:

(To be filled in by the Head Office)

Nomination by

Signature of Head Office.....

Designation

Dated

Office

Designation



कयर बोर्ड
COIR BOARD
(सूक्ष्म, लघु और मध्यम उद्यम मंत्रालय, भारत सरकार
Ministry of MSME, Govt. of India)

कायर हाउस /Coir House,
एम.जी रोड/ M.G. Road,
कोच्ची /Kochi 682 016
दूर भाष/Tel : +91-484-2351807/
2351788/2351954
फैक्स/Fax : +91-484-2370034/2354397
ई-मेल/e-mail :coirboard@nic.in
वेब/Web:info@coirboard.org

DETAILS OF SERVICE PARTICULARS

1. Name in full
(in block letters) : Shri/Smt./Kum.
2. Present designation & Scale of pay :
3. Office/Section in which working :
4. Whether SC/ST/OBC/UR :
5. Date of Birth
(as approved at the time of joining) :
6. Educational Qualifications
(in chronological order with
self attested copies) :
7. Native place (as specified during
appointment) :
8. Permanent residential address with
phone number :
9. Address for communication with
phone number :
10. Date of joining the Board :
11. Past services, if any to counted for
pension(with proof) :
12. Promotions acquired (with designation,
O.O.No. & date, ad-hoc/regular etc):

I hereby declare that the details furnished by me are correct to the best of my knowledge and belief.

Date :
Place :

Signature: