Form PF No. 5

(See rule - 45)

(to be submitted in duplicate)

Application for withdrawal from GPF Account for Higher Education

Department _____

Address of Head of Office _____.

1	Name of the Subscriber:	
2	Designation:	
3	Account number (complete):	
4	Existing Pay Band/Pay Scale	
5	Existing Pay including Dearness Pay, Personal Pay, Special Pay, if any	
6	Date of joining service :	
7	Date of Superannuation :	
8	Balance at credit of the subscriber on the date of the application as below:	
	(i) Closing balance as per latest GPF statement for the year _____ (copy enclosed)	Rs.
	(ii) Add regular monthly subscription plus lumpsum subscription, if any, after the date of General Provident Fund statement mentioned at (i) above:	Rs.
	(iii) Add refunds of advance(s) after the date of statement mentioned at (i) above:	Rs.
	(iv) Total (i) + (ii) + and (iii):	Rs.
	(v) Less amount of advance(s) and withdrawal(s) taken after the date of General Provident Fund statement mentioned at (i) above:	Rs.
	(vi) Net balance at credit:	Rs.
9	Amount of withdrawal required:	Rs.
10	Withdrawal is being applied for higher education of:-	Son/Daughter
11	Name of the Child	

12	**Details of the Course of Study**	
13	**Name of the Institution**	
14	**Evidence of Admission**	
15	**Evidence of fees to be supported to justify the withdrawal**	
16	**Rule under which the withdrawal is admissible**	
17	**Has any advance/withdrawal been taken earlier for this purpose? If yes, the amount of withdrawal taken with detail:**	

Sr. No.	Name of person for whose study advance/withdrawal has been availed	Sanction No. and Date	Amount	Name of the office from where payment is received	Date of drawal
1.					
2.					
3.					

1. Certified that I have utilized the withdrawal(s) taken from my General Provident Fund earlier for the purpose for which the withdrawal(s) was/were sanctioned. I have already submitted the utilization certificate to the Head of Office as required under rules 51.

2. Certified that the person for whose education the advance has been applied for, is fully and solely dependent upon me.

3. Certified that the information given in this application is true and correct and nothing has been concealed or mis-stated therein. I am aware that in case of any concealment or mis-statement of facts, I will be debarred from taking any withdrawal(s) from my General Provident Fund Account for a period of five years.

Dated _____

Signature of the Applicant

Name _____

Designation _____

Branch _____

(Examination/Verification by the Office)

1. This is to certify that the office has checked and verified the details submitted by the subscriber in this application. All the details furnished by the subscriber are verified to be correct.

2. The subscriber is entitled to the withdrawal being applied for under the rule 45; or

   the subscriber is not entitled to the withdrawal applied for and has requested for relaxation in rules on the following grounds:

   (i)

   (ii)

   (iii)

Dated: _____ (Signature of the Head of office with Seal)

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