

(See Rule 4.10.1)

**INDIAN STATISTICAL INSTITUTE**  
**NOMINATION FOR DEATH/RETIREMENT GRATUITY**

*(When the employee has no family and wishes to nominate one person or more than one person).*

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 Institute 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 the employee	Age of the nominee(s)	Amount or 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 employee or the nominee dying after the death of the employee 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).

Form IV (Contd.)

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

*Note :* (i) The employee 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 .....

Signature of employee

Roll No.

Witnesses to Signature :

(1) *Signature in full with date* .....

*Name and Roll No.* .....  
(in block letters)

*Designation* .....

*Section/Unit* .....

(2) *Signature in full with date* .....

*Name and Roll No.* .....  
(in block letters)

*Designation* .....

*Section/Unit* .....

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(To be filled in by the Drawing and Disbursement officer, New Pension Scheme)

Nomination by .....

Roll No. ....

Designation .....

Office/Section/Unit/Centre .....

Signature of  
Drawing and Disbursement officer,  
New Pension Scheme  
Date .....

**Pro forma for acknowledging the receipt of the nomination form by the Head of Office**

To

.....  
.....  
.....

Sir,

In acknowledging the receipt of your nomination, dated the ...../cancellation, dated the .....of the nomination made earlier in respect of gratuity in Form ..... ,I am to state that it has been duly placed on record.

Place .....

Dated the .....

Signature of **DDO, N.P.S**

Designation.....

**NOTE.** - The Government servant is advised that it would be in the interest of his nominees if copies of the nominations and the related notices and acknowledgements are kept in safe custody so that they may come into the possession of the beneficiaries in the event of his death.