



Shaheed Rajguru College of Applied Sciences for Women

शहीद राजगुरु कॉलेज ऑफ एप्लाइड साइंस फॉर वीमेन

University of Delhi

दिल्ली विश्वविद्यालय

Vasundhara Enclave, Delhi – 110096

वसुंधरा एनक्लेव, दिल्ली-110096

PROVIDENT FUND WITHDRAWAL FORM

1. Name of the subscriber – _____
2. Account Number – _____
3. Designation – _____
4. Pay and level – _____
5. Date of joining service and date of superannuation – _____
6. Balance at credit of the subscriber on the date of application as below –
 - a) Closing balance as per statement for the year _____ – _____
 - b) Credit from March 20 __ to _____ on account of monthly subscriptions @ Rs. _____ p.m. – _____
 - c) Refunds made to the fund after the closing balance, vide (a) above – _____
 - d) Withdrawal during the period from _____ to _____ - _____
 - e) Net balance at credit on date of application – _____
7. Amount of withdrawal required – _____
8. Purpose for which the withdrawal is required – _____
9. Whether any withdrawal was taken for the same purpose earlier.
If so, indicate the amount and the year – _____

Date – _____

Signature of Applicant – _____

Name – _____

Designation – _____

Department – _____