

ANNA UNIVERSITY : CHENNAI 600 025 <u>LIFE CERTIFICATE (TO BE CERTIFIED BY A GAZETTED OFFICER/IOB BANK MANAGER)</u>

Pensioner's Page No :					
Name of the Pensioner/					
Family Pensioner :					
Name of the Deceased					
Pensioner :					
Aadhar Number :					
Contact Number :					
Residential Address :					
t					
Certified that Th./Tmt	is alive this day of	and he/she			
has signed in my presence.					
Signature of the Pensioner/ Family Pensioner					
Place:	Signature of the attesting office	er			
Date:	Name and Designation with Off				
NON - EMPLOYMENT /	RE - EMPLOYMENT CERTIFICATE				
declare that I have not been serving in any capa Corporation, Autonomous Body or Society of Centra	acity either in a Government Departmen	. / 000			
Educational Institution, including Self Finance Colleges.					
Educational Institution, including Self Finance Colleges	(OR)	ry or a Local Body or			
	(OR) he office of solidated salary during the period from	ry or a Local Body or			
Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in to in receipt of Rs	(OR) he office of solidated salary during the period from	ry or a Local Body or			
Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in to in receipt of Rs	(OR) he office of solidated salary during the period from	ry or a Local Body or			
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Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in the information receipt of Rs	(OR) he office of solidated salary during the period from enclosed) Signature	ry or a Local Body or and I am			
Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in the interest of Rs	he office of	and I am to			
Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in the information receipt of Rs	he office of	and I am to			
Educational Institution, including Self Finance Colleges. I declare that I have been employed / re-employed in the interest of Rs	he office of	and I am to S ONLY) ersity.			

Signature

Name of the Family Pensioner

Place:

Date:

ANNEXURE 2

ANNA UNIVERSITY :: CHENNAI 600 025

s.NO.	DETAILS OF THE PENSIONERS / FAMILY PENSIONERS		
1	NAME OF THE PENSIONER / FAMILY PENSIONER	:	
2	AADHAR NUMBR OF THE PENSIONERS / FAMILY PENSIONERS (COPY SHOULD ENCLOSED)	•	
3	NAME OF THE HUSBAND / WIFE	:	
4	DATE OF BIRTH OF THE PENSIONER / FAMILY PENSIONER	·	
5	DATE OF RETIREMENT	•	
6	DESIGNATION AT THE TIME OF RETIREMENT		
7	DEPARTMENT AT THE TIME OF RETIREMENT	•	
8	DATE OF DEATH OF THE PENSIONER (IN CASE OF FAMILY PENSIONER)		
9	E-MAIL ID OF THE PENSIONER / FAMILY PENSIONER)	•	