Graphical user interface, text

Description automatically generated**अखिल भारतीय आयुर्विज्ञान संस्थान राजकोट,** गुजरात 360001

**All India Institute of Medical Sciences, Rajkot, Gujarat 360001**

**A Central Autonomous Body under PMSSY, MoH&FW**

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**MANDATE FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NAME | | |  | | | | | | | | |  |  |
|  | | | | | | | | | | | | |
| FATHER /HUSBAND NAME | | |  | | | | | | | | |  |
|  | | | | | | | | | | | | |
| DATE OF BIRTH | | | / / | | | | GENDER | M / F | | | |  |
|  | | | | | | | | | | | | | |
| CATEGORY | UR/ OBC/ SC/ST | | | RELIGION | |  | | PHYSICALLY  CHALLENGED | | | YES / NO | | |
|  | | | | | | | | | | | | | |
| DATE OF  JOINING | / / | | | DESIGNATION | |  | | DEPARTMENT  NAME | | |  | | |
|  | | | | | | | | | | | | | |
| CONTACT DETAILS | | | | | | | | | | | | | |
| ADDRESS | |  | | | | | | | | | | | |
| CITY | |  | | | STATE | |  | | PIN CODE |  | | | |
| CONTACT NO. | |  | | | MAIL ID | |  | | | | | | |
|  | | | | | | | | | | | | | |
| BANK DETAILS | | | | | | | | | | | | | |
| BRANCH & BANK  NAME | |  | | | | | | | | | | | |
| A/C NO. | |  | | | | | IFSC CODE | |  | | | | |
| PAN NO. | |  | | | | | | | | | | | |
| AADHAR NO. | |  | | | | | | | | | | | |
| NPS (PRAN) NO.  (IF HAVE) | |  | | | | | | | | | | | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| HAVE YOU BEEN PREVIOUSLY EMPLOYED WITH AIIMS RAJKOT | | | | | YES / NO | |
| IF YES | DESIGNATION |  | DATE OF JOINING |  | DATE OF RELIVING |  |

SIGNATURE

INSTRUCTIONS:-

1. **Please fill Form in block letters.**
2. **Enclosed these documents:-**
   1. **Copy of PAN card.**
   2. **Copy of Bank Account details.**
   3. **Copy of Office Memorandum.**
   4. **Copy of PRAN card with NPS (PRAN) shifting form (if already have PRAN No), otherwise fill new subscriber registration form.**
3. **NPS new subscriber registration form and NPS (PRAN) shifting form available at AIIMS, Rajkot site.**