

HIMACHAL PRADESH UNIVERSITY
(NAAC Accredited 'A' Grade University)
"ESTABLISHMENT BRANCH"

No.9-1/2023-HPU(Estt)

Dated: 25 MAY 2023

'CIRCULAR'

In pursuance of Office Memorandum No. Fin(Pen)A(3)-1/2023 dated 4.5.2023 and Notification No. Fin(Pen)A(3)-1/2023 dated 4.5.2023 issued by the Special Secretary (Finance) to the Government of Himachal Pradesh as adopted in the Himachal Pradesh University vide Notification No. 3-24/76-HPU(Genl.)Vol-VIII dated 16.05.2023, all existing/retired employees who are/were covered under the National Pension System (NPS) and those have already retired/died, between the period 15.05.2003 to 31.03.2023 and eligible family member of deceased employee who fulfil the eligibility criteria under CCS(Pension) Rules, 1972, shall exercise an option for the same on the prescribed format at **Annexure-II** and submission of an undertaking at **Annexure-III**, duly notarized, subject to deposit of the Government /University contribution and dividend/return, till the date of withdrawal to the University alongwith application for allotment of New GPF Number/Form of Nomination, within sixty days from the date of issuance of this Circular. Further, an employee, who wishes to remain under the National Pension System, shall exercise an option, within sixty days from the date of issuance of Circular as per **Annexure-I**, which shall be duly notarized.

However, it is made it clear that Old Pension Scheme shall be implemented strictly as per instructions/standard operating procedures as laid down in Office Memorandum No. Fin(Pen)A(3)-1/2023 dated 4.5.2023, which is available in the University website www.hpuniv.ac.in.

In view of the above, all concerned are hereby directed to submit their option within stipulated period to the undersigned and if option is not received within the stipulated period, it shall be deemed that he/she wishes to be continued under the National Pension System.

Encl: As above

Endst. No. Even

Copy forwarded for information and necessary action to:

1. The Dean of Studies/DSW/Chief Warden, H.P. University, Shimla-5.
2. All the Deans of Faculty, Dean-cum-Director, CDC/Dean, Planning & Teachers' Matters, HPU, Shimla-5.
3. All the Chairmen/Chairpersons, Teaching Deptts, HPU, Shimla-5.
4. The Director, ICDEOL/Phy.Ed./UIT/HRDC/PECC/PRC/DIS/AERC H.P. University, Shimla-5.
5. The Director, UCBS/UILS, HPU, Shimla-4.
6. The Director, HPU Regional Centre, Dharamshala, Distt. Kangra, HP.
7. The Principal, Department of Evening Studies, Shimla-1.
8. The Incharge, HPU Library/HPU Health Centre/Faculty House, HPU, Shimla 5.
9. The Finance Officer, HPU, Shimla-5.
10. The Controller of Examinations/ACOE/P&DO/Joint Controller, SAD/ Chief Security Officer, Public Relation Officer, HPU, Shimla-5.
11. All the Deputy /Assistant Registrar, HPU, Shimla-5.
12. All the Controlling/Branch/Section Officers HPU, Shimla-5.
13. The Web Administrator, HPU, Shimla-5 with the direction to upload the same on University website.
14. The Secretary/SPS to Vice-Chancellor/PA to Registrar, HPU, Shimla-5.
15. Notice board.

huetpms
REGISTRAR-2023
Dated: 24/5/23
25 MAY 2023

huetpms
REGISTRAR

Option to remain under National Pension System (NPS)

Affidavit

I, _____ designation _____ Office/
Department _____ hereby exercise an option today on _____, to
continue (remain) in the existing National Pension System (Contributory Pension
Scheme) in reference to Finance Department Notification No.Fin(Pen)A(3)-
1/2023 dated 4th May, 2023.

This Option exercised by me shall be final and irrevocable.

Date of
Option _____

Signature of Subscriber _____
Name _____
Designation _____
PRAN _____
PMIS No _____
IP No _____
Office in which employed _____
Telephone No _____

Signature

Option to cover under the CCS (Pension) Rules, 1972 (OPS)

Affidavit

I, _____ designation _____ Office/
Department _____ hereby solemnly affirm and exercise an option
today on _____, in reference to Notification No. Fin(Pen)A(3)-1/2023 dated
4th May, 2023, and declared on oath as under:-

1. That I hereby tender affidavit to the effect that I have carefully gone through and understood the Government Notification No. Fin(Pen)A(3)-1/2023 dated 4th May, 2023 & the Standard Operating Procedure (SOP) and after due application of my mind, I hereby exercise an option to be covered under the CCS (Pension) Rules, 1972 (OPS)
2. That I will be entitled for the benefit under CCS (Pension) Rules, 1972 (OPS) only after depositing the Government Contribution alongwith dividend/ return earned till the date of withdrawal on such contribution, in the Government Treasury. Any shortage in the amount of Government contribution and dividend/ return thereon, shall be adjusted/ recovered from my DCRG/ Leave encashment/ GIS payments.
3. That I was appointed between the period 15.05.2003 to 31.03.2023 and retired from service on _____. I hereby tender affidavit to the effect that I have carefully gone through and understood the Government Notification No. Fin(Pen)A(3)-1/2023 dated 4th May, 2023 & the Standard Operating Procedure (SOP) and after due application of my mind, I hereby exercise an option to be covered under the CCS (Pension) Rules, 1972 (OPS) subject to deposit of Government contribution and dividend/ return earned thereon, till the date of withdrawal to the Government treasury. In case, I fail to deposit Government contribution and dividend earned thereon, to the Government Account, I will not be entitled to any Pension under the Central Civil Services (Pension) Rules, 1972.
4. That late Shri _____ my _____ (relation) who was appointed between the period 15.05.2003 to 31.03.2023 and died during service/ after retirement, on _____. I/We _____ (relation) of late Shri _____ (eligible family member(s)) hereby tender affidavit to the effect that I/We have carefully gone through and understood the Government Notification No.

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Fin(Pen)A(3)-1/2023 dated 4th May, 2023 & the Standard Operating Procedure (SOP) and after due application of mind, hereby exercise an option to be covered under the CCS (Pension) Rules, 1972 (OPS) subject to deposit of Government contribution and dividend/ return earned thereon, till the date of withdrawal to the Government treasury. In case, I/We fail to deposit Government contribution and dividend/ return earned thereon, to the Government Account, I/We, will not be entitled to any Pension under the Central Civil Services (Pension) Rules, 1972.

5. This option exercised by me shall be final and irrevocable.
6. That in the event of non-receipt of my share from the NPS account in any form, I will not claim for the same from the Government.
7. That my contribution toward NPS account @10 % may be stopped w.e.f. _____ and I may be covered under the General Provident Fund(CS) Rules, 1960.
8. That in case of any ambiguity the interpretation made by the Finance Department will be final and acceptable to me.

lip

Date of Option _____

Signature _____
Name _____
Designation _____
PRAN _____
PMIS No _____
IP No _____
Office in which employed _____
Telephone No _____

An Undertaking (on affidavit) for the adjustment/deposit of Government contribution and dividend/ return, on exercising an option for the CCS (Pension) Rules, 1972(OPS).

I, _____ designation _____ Office/ Department _____ have carefully gone through the Government Notification No. Fin(Pen)A(3)-1/2023 dated 4th May, 2023 and understood that I will be eligible for pension under the CCS (Pension) Rules, 1972 (OPS) only after depositing the Government contribution deposited in my NPS account and the amount of dividend earned on it, till the date of withdrawal, in the Government Account (Treasury). I also agree for adjustment of the amount of Government contribution and dividend earned on it, from the amount of Gratuity/ Leave Encashment/ Group Insurance Scheme, payable to me.

Or

That late Shri _____ my _____ (relation) who was appointed between the period 15.05.2003 to 31.03.2023 and died during service/ after retirement, on _____. I/We _____ (relation) of late Shri _____ (eligible family member(s)) have carefully gone through the Government Notification No. Fin(Pen)A(3)-1/2023 dated 4th May, 2023 & the Standard Operating Procedure (SOP) and understood that I/We, will be eligible for pension under the CCS (Pension) Rules, 1972 (OPS) subject to deposit of Government contribution and dividend/ return earned under the NPS, till the date of withdrawal, in the Government Account (Treasury).

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Date of	Signature	_____
Option _____	Name	_____
	Designation	_____
	PRAN	_____
	PMIS No	_____
	IP No	_____
	Office in which employed	_____
	Telephone No	_____

Application for Allotment of New General Provident Fund Number
(in reference to OPS Notification No.3-24/76-HPU(Cen)Vol-VIII dated:16-05-2023, HPU)
(in reference to OPS Notification No.Fin(Pen)A(3)-1/2023 dated:04-05-2023, Govt.of H.P.)
(To be submitted in duplicate)

1. Name of Applicant
2. Designation
3. Father's/Husband Name
4. Office to which attached (if on deputation, state the parent Department, Government also)
.....
5. Service to which the applicant belongs
6. Whether the applicant is permanent, temporary or re-employed.....
7. Date of Regular Appointment.....
8. Whether applicant's service is pensionable or not.....
9. PRAN(if any allotted to applicant)
10. Employee Code
11. Date of Birth of the applicant
12. Date of Superannuation
13. Basic Pay of applicant(Level =)
14. Monthly rate of Subscription
15. Whether the applicant has a family or not
16. Account No. to be allotted by the Finance Officer

Date:

Signature of applicant

Place:

Mobile No.....

Certified that the applicant Sh./Smt./Ms./Dr..... has completed one year of regular service and he/she has not yet been allotted GPF Number. It is also certified that the applicant has opted OPS by exercising an option within the stipulated time period.

Date:

Signatures of the disbursing Officer

Place:

Designation.....

Name of DDO

Contact Number of DDO/Office

DDO Code

Head of Account

Office Number Dated the 20..... returned with account number allotted. This number should be quoted in all correspondence connected therewith.



• FORM OF NOMINATION / REVISED NOMINATION •
(to be filed in duplicate)

Account No. _____

HPU/SRF
HPU/CPF

1	2	3	4	5	6	7	8
Name and full address of the Nominee(s)	Relationship with the subscriber	Age of the nominee(s)	*Share payable to each nominee(s)	Contingencies of the happening of which the nomination will become invalid.	Name, address and relationship of the person(s) if any to whom the right of nominee shall pass in the event of his/her predeceasing the subscriber.	If the nominee(s) is not a member of the family as provided in rule-2 indicate the reasons	Whether the nomination is fresh or revise

Dated this _____ day of _____ at _____

Two witness to signatures

1. Name & address:-

(For use by the Estt. Branch only)

Signature of the Subscriber
Name (in block letters) _____

(Deputy Registrar) Establishment

(Reverse of the form)

Space for use by the Head of Office/Pay or Accounts office.

Nomination by Shri/Smt/Kumar _____

Date of receipt of nomination : _____

Designation _____

Signature of Head of Office/Pay & Accounts Officer
NOMINATION ACCEPTED.

Finance Officer, HPU.

FORM FOR NOMINATION:

Instructions for the Subscribers:

- a) The form should be filled in duplicate carefully & complete in all respect. No column should be kept unattended.
- (b) Definition of term "Family" as given in the General Provident Fund Rules is reproduced below:

Family Means:

i) In the case of a male subscriber, the wife or wives, parents, children, minor brothers, unmarried sisters, deceased son's widow and children and where no parent of the subscriber is alive, a paternal grand-parent.

Provided that if a subscriber proves that his wife has been judicially separated from him or has ceased under the customary law of the community to which she belongs to be entitled to maintenance she shall henceforth be deemed to be no longer a member of the subscriber's family in matters to which these rules relate unless the subscriber subsequently intimate in writing to the Accounts Officer that she shall continue to be so regarded.

ii) In case of a female subscriber, the husband, parents, children, minor brothers, unmarried sisters deceased son's widow and children and where no parent of the subscriber is alive a paternal grand-parent.

Provided that if a subscriber by notice in writing to the Accounts Officer expresses her desire to exclude her husband from her family in matters to which these rules relates unless the subscriber subsequently cancels such notice in writing.

Note: Child means: legitimate child and includes an adopted child where adoption is recognised by the personal law governing the subscriber.

- (c) Column-4: If only one person is nominated the word "In Full" should be written against the nominee, of more than one person is nominated, the share payable to each nominee over the whole amount of the provident fund shall be specified.
- (d) Column-5 Death of the nominee(s) should not be mentioned as contingency in this Column.
- (e) Column-6 Do not mention your name.
- (f) Drawn line across the blank space below last entry in order to prevent insertion of any name after you have signed.