

CHITTARANJAN NATIONAL CANCER INSTITUTE  
37, S.P.Mukherjee Road, Kolkata-700026

***NOMINATION FOR RETIREMENT GRATUITY / DEATH GRATUITY***

[Rule 53 (1)]

(When the Government servant has a family and wishes to nominate one member or more than one member thereof.)

I.....having / having no family, hereby nominate the person/persons mentioned below and confer on him/her/them the right to receive, to the extent specified below, any gratuity, the payment of which may be authorized by CNCI in the event of my death while in service and the right to receive on my deaths, to the extent specified below, any gratuity, which having become admissible to me on retirement, may remain update at my death.

| Original nominee(s)                        |                                      |     |                                             | Alternate nominee(s)                                                                                                                                                                                                                            |                                             |
|--------------------------------------------|--------------------------------------|-----|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Name and addresses of the nominee/nominees | Relations hip with the CNCI employee | Age | Amount or share of gratuity payable to each | Name, address, relationship and age of person or persons, if any, to whom the right conferred on the nominee predeceasing the CNCI employee or the nominee dying after the death of the CNCI employee but before receiving payment of gratuity. | Amount of share of gratuity payable to each |
| 1                                          | 2                                    | 3   | 4                                           | 5                                                                                                                                                                                                                                               | 6                                           |
|                                            |                                      |     |                                             |                                                                                                                                                                                                                                                 |                                             |

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

Note:

- (i) The Government servant should draw lines across the blank his last entry to prevent insertion of any names after he has signed.
- (ii) Strike out which is not applicable.

Dated this .....day of .....at.....

Signature of two witnesses:-

1.....  
2.....

Signature of Government Servant

Name:.....

(To be filled by the Head of Office)

Nomination by.....  
Designation.....  
Office.....

Signature of Head of Office.....  
Date.....  
Designation.....