

CATEGORY OF EMPLOYEE: EXISTING REGULAR EMPLOYEES UNDER STATE GOVERNMENT ONLY**Note:** All asterisk* fields are mandatory to fill**Attachments:** 1. Xerox copy of employee's ID Proof: Aadhar/DL/PAN/Passport/Voter/Birth Certificate any one showing Date of Birth
(Date of Birth displaying in ID must be same with service book)

2. Xerox copy of pension nominee's ID proof: Aadhar/DL/PAN/Passport/Voter/Birth Certificate any one showing Date of Birth

✚ PERSONAL DETAILS

1. Employee's Name*: _____
2. Father's Name*: _____
3. Mother's Name*: _____

DDO CODE: _____**❖ PRESENT ADDRESS**

- a. House No.*: _____
- b. Locality*: _____
- c. City/Town/Village*: _____
- d. District*: _____
- e. Police Station*: _____
- f. Post Office*: _____
- g. Pin code*: _____
- h. State*: _____
- i. Country*: _____

❖ PERMANENT ADDRESS same as Present Address

- a. House No.*: _____
- b. Locality*: _____
- c. City/Town/Village*: _____
- d. District*: _____
- e. Police Station*: _____
- f. Post Office*: _____
- g. Pin code*: _____
- h. State*: _____
- i. Country*: _____

4. Date of Birth (as per Service Book)*: _____
(DoB proof xerox copy required to attach: Aadhar/DL/PAN/
Passport/Voter/Birth Certificate/Service Book)
5. Blood Group*: _____

6. Gender*: _____
7. Status of Employee*: Regular
(Only existing Regular employees of State Government)

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8. Marital Status*:_____

16. Emergency Contact No.*:_____

9. Religion*:_____

17. Email ID:_____

10. Nationality*:_____

18. Employee ID Proof*: Aadhar / DL / PAN / Passport / Voter /
Birth Certificate (**Xerox copy require to attach**)

11. Caste*:_____

19. ID Proof No.*:_____

12. Weight (in Kg):_____

20. Is it Remote Location*: Yes / No

13. Height (in cm):_____

14. Personal Identification Mark*:_____

21. Have you got 40% or Above Disability*: Yes / No

15. Mobile No.*:_____

❖ **EMPLOYEE’S FAMILY DETAILS required for Pension (Form 3)**

- **Pension Form 3** is required **only** for **Regular (State Service)** employees
- ID Proof Name: **Aadhar/DL/PAN/Passport/Voter/Birth Certificate** any one showing Date of Birth to be attached with this form for each member

Sl. No	Name of the members of the Family*	Relationship with the Officer* (Annex A)	Date of Birth*	Children of (Annex B)	Condition of person* (Annex C)	Occupation	Marital Status*	ID proof Name* (xerox copy attach)	ID proof No*
1									
2									
3									
4									
5									
6									
7									
8									

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PF DETAILS [Required **only** for **Regular** (State Service)]

[GPF No. must contain last 4 digits numeric number]

For example: _____(MZ)1234

1. GPF / PPAN / PRAN*: _____

APPOINTMENT DETAILS (Required for All)

❖ **ENTRY INTO GOVERNMENT SERVICE**

1. Date of Joining*: _____

Forenoon Afternoon

❖ **CURRENT POSTING** (Required for All)

**(Instruction: Audit No. is require only for Group A & B-
Gazetted officer)**

1. Group*: _____

2. Category*: State Service Central Service

3. Audit No.: _____

4. District*: _____

5. Department*: _____

6. Name of Post*: _____

7. Location*: _____

8. Name of Office*: _____

9. Office Address*: _____

10. Name of Treasury Office of DDO* _____

PAY FIXATION (Only Present Pay, required for All)

6th PAY

7th PAY

❖ **SIXTH PAY**

1. Pay Band Name*: _____

2. Pay Band*: _____

3. Grade Pay*: _____

4. Pay in Pay Band*: _____

5. Basic Pay*: _____

6. Effective Date of 6th Pay*: _____

❖ **SEVENTH PAY**

1. Pay Level*: _____

2. Basic Pay*: _____

3. Cell No. of the Pay Matrix*: _____

4. Effective Date of 7th Pay*: 01.01.2016

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✚ EDUCATION (Required for All)

Sl. No	Latest Qualification* (HSLC/HSSLC/Graduate/Post Graduate)	Name of Qualification*	Year of Passing*	Grade/ Percentage/ CGPA	Name of School/College/University*
1					

✚ BANK DETAILS (Required for All)

(Account Holder Name must be same with Bank Passbook)

Sl. No	Account Holder Name*	Bank Name*	Branch Name*	IFSC Code*	Account No.*
1					

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Only for Regular (State Service) employees

ANNEX A

(Employee's Family details required for pension (Form 3))

**Relationship with the Officer as per CCS Pension Rules
51, 52, 53 & sub-rule 10(B)**

- Brother (below 18 yrs)
- Children of a pre-deceased son
- Disabled Brother
- Disabled Sister
- Father
- Husband
- Illegitimate Son
- Illegitimate Daughter
- Mother
- Married Daughter
- Stepbrother (below 18 yrs)
- Unmarried Son(below 25 yrs)
- Unmarried Stepson(below 25 yrs)
- Unmarried Adopted Son(below 25 yrs)
- Unmarried Adopted Daughter
- Unmarried Daughter
- Unmarried Stepdaughter
- Unmarried Sister
- Unmarried Stepsister
- Widowed Adopted Daughter
- Widowed Daughter
- Widowed Stepdaughter
- Widowed Sister
- Wife
- Wives

Note:

1. If Relationship is **Husband/Wife/Wives, Part B: Children of** shall be Nil

For any Government Servant:

❖ If Relationship with the Officer is

- Brother (below 18 yrs)
- Disabled Brother
- Disabled Sister
- Father
- Husband
- Mother
- Stepbrother (below 18 yrs)
- Unmarried Sister
- Unmarried Stepsister
- Widowed Sister
- Wife
- Wives
- Illegitimate Son
- Illegitimate Daughter
- Unmarried Adopted Son(below 25 yrs)
- Unmarried Adopted Daughter
- Widowed Adopted Daughter

Children of shall be Nil

For Male Government Servant:

❖ If Relationship with the Officer is

- Pre-deceased son's son
- Pre-deceased son's daughter
- Married Daughter
- Unmarried Son(below 25 yrs)
- Unmarried Stepson(below 25 yrs)

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- Unmarried Daughter
- Unmarried Stepdaughter
- Widowed Daughter
- Widowed Stepdaughter

Children of shall be 1st Wife/2nd Wife/3rd Wife

For Female Government Servant:

❖ If Relationship with the Officer is

- Pre-deceased son's son
- Pre-deceased son's daughter
- Married Daughter
- Unmarried Son(below 25 yrs)
- Unmarried Stepson(below 25 yrs)
- Unmarried Daughter
- Unmarried Stepdaughter
- Widowed Daughter
- Widowed Stepdaughter

Children of shall be Nil

ANNEX B

For Male Government Servant

(Children of)

- 1st Wife
- 2nd Wife
- 3rd Wife

For Female Government Servant

(Children of)

Shall be Nil

ANNEX C

(Condition of person)

- Normal
- Disorder of mind
- Disability of mind
- Mentally retarded
- Physically crippled
- Physically disabled