

## PROVIDENT FUND LOAN APPLICATION

## Loans Section/Department of Financial Administration University of Peradeniya

1.Details of the applicant	Details of the applicant								
i. Full Name: (Rev/Prof/Dr/Mr/Ms)									
ii. (a) NIC No: [P] [B] (b) Provident Fund No: [P]									
iii. (a) Date of Birth: D D M M Y Y Y Y (b) Age:									
iv. Address :(a) Temporary:									
(b) Permanent:									
(v) Telephone No:(a) Office:		(b) Re	esidence:						
(c) Mobile(i) (d) E-mail :			(ii) [					<u> </u>	
vi.Marital status: Single									
i.(a) Designation: (b) Date of first Appointment :							Y		
(c) Place of work: (1) Department/section: (2) Faculty: (d) Confirmed in the post: Yes/No (e) Still in the Probation period: Yes/No viii.If the applicant got transfer: (a) University/Campus/Institute: (b) Place of work: (c) Date of transferred:  2. Details of Loan applying									
i. Reason for applying the loan : ii. Expected amount : Rs.									
3. Details of proposed guarantors									
i. Name of the guarantor:			•••••						
ii.Designation:	i	i.Provident Fund I	No :	P					
iv.Faculty :v.Department/Section:									
4. Applicant's Liabilities as a guarantor									
Name of the creditor  1. 2.	P/ Fund No	Type of loan	Date o guarante		An	noun	t(Rs.	)	

## 5. Declaration

I have read the University Grants Commission Circular No. 362 dated 04the April 1988 on the Payment of Loan from the Universities Provident Fund and I am aware of the conditions under which the loan is granted.

I am also aware that the loan that will be given to me is secured against the balance lying to my credit in the Universities Provident Fund.

In the event of my ceasing to be employed in the university for whatever reasons, I hereby authorize the Registrar of the University and the Secretary of the University Grants Commission to deduct the balance (Capital plus interest accrued up to the date of settlement of the loan) unpaid on my loan before the provident fund is refunded to me.

In the event of my death before ceasing to be employed or in the event of death after ceasing to be employed but before the Provident Fund is refunded, I hereby authorize the Registrar of the University and the Secretary, University Grants Commission to deduct the balance (capital plus interest accrued up to the date of settlement of the loan) unpaid on my loan before the Provident Fund is refunded to my heirs.

Signature of the Applicant	Date
Witness to signature :  Name :  Date :	
***Witness should be the Head of the Department /	Unit.
6. For office use only (Academic/ Non-Aca	demic Establishment Division)
6.1 Violation of bond	
violator/not a bond violator. The value of the viol In words Rs.	ent Fund loan from the remaining balance of the
<b>6.2 Certification:</b> (Academic/ Non-Academic H	Establishment Division)
I hereby, certify that the details stated in the "Semaintain in the Academic/ Non-Academic Estab	ection 1" are true and accurate as per the records lishment Division of the University.
Assistant/ Senior Assistant/ Deputy Registrar	Date