

FORM – I
(See Clause 6)

Application for Pension Benefits to the Journalists and Families

1. Name of the applicant and :
Designation
- 2 Date of Birth & Age of the applicant :
(With a proof of Date of Birth)
- 3 Nationality :
- 4 Whether the applicant is the native :
of U.T. of Puducherry by Birth or by
Continuous residence (Native /
Residence Certificate must be
attached)
- 5 Address :
Present :
- Permanent :
- 6 Period of residence in the present :
address
- 7 Father's Name :
- 8 Mother's Name :
- 9 Name of the spouse or assignee to :
whom family pension is authorized
(relation to be specified)
- 10 Name of the Newspaper/Journals/ :
Agency in which the applicant has
worked
11. Periodicity of the Journal :
- 12 Length of Service in the filed :
(Certificate issued by the
Newspaper/Journal/Agency
authority to be attached in original)
- 13 Whether the applicant served as a :
full time employee

- 14 Whether the applicant is receiving :
any Pension/Honoraria from
Central/State Government under any
scheme. If yes, please furnish the
details
- 15 Whether the applicant is Physically :
Handicapped or suffering from
incurable diseases/unable to pursue
their profession on account of
chronic ill-health, or if any. (If yes,
please furnish the Medical
Report/Certificate)
16. Date of retirement (Certificate issued :
by newspaper/Journal/Agency
authority to be attached in original)
- 17 Whether the applicant received :
Gratuity and other retirement
monetary benefits, If any, from the
former employer. If yes, please
furnish the amount and details of the
same
- 18 Income of the applicant and family :
from all sources (Certificate should
be obtained from an officer of
Revenue Department not below the
rank of Tahsildar)
- 19 Whether the applicant is an :
Accredited Journalist (If yes, please
furnish the details)

DECLARATION

I, Hereby solemnly affirm and declare
that the particulars furnished above are true and I have not suppressed any
material fact that will disentitle me to grant of Pension Benefits.

Signature of the Applicant

Place :

Date :

FORM - II

[See Clause 6(c)]

SERVICE CERTIFICATE

(To be issued by the Employer)

Certified that Thiru/Tmt/Selvi S/o, W/o, D/o
..... has worked from to as
Full Time Editor / Sub-Editor / Reporter/ Correspondent of the
Newspaper/Journal/Agency viz., registered with the
Registrar of Newspapers for India, Ministry of Information and Broadcasting,
Government of India, New Delhi vide No.

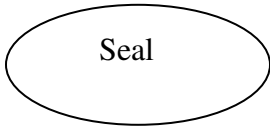
Place :

Signature :

Date :

Name :

Designation :



FORM - III

[See Clause 7(1)]

VERIFICATION CERTIFICATE

(To be verified and Certified by the Assistant Director,
Directorate of Information and Publicity)

Certified that the application of Thiru/Tmt. S/o,
W/o, D/o for providing Pension
Benefits to the Journalists of Union Territory of Pondicherry has been scrutinized
and the particulars furnished by him/her therein are found to be correct.

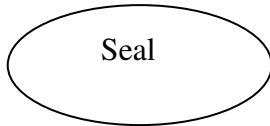
Place:

Signature :

Date :

Name :

Designation :



FORM - IV

[See Clause 7(2)]

**GOVERNMENT OF PUDUCHERRY
DIRECTORATE OF INFORMATION AND PUBLICITY**

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No. DIP/PRESS/ /200 Puducherry, dated

ORDER

Sub : DIP - Payment of Pension under the scheme for grant of Pension Benefits to Journalists and their families,2006 - Sanction conveyed - Reg.

Ref : His/Her application dated
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In pursuance of Clause 7(2) of the scheme for grant of Pension Benefits to Journalists and to their families in the Union Territory of Puducherry , 2006 sanction of the Selection Committee is hereby conveyed for payment of Rs. 2,000/- (Rupees two thousand only) per month to Thiru / Tmt / Selvi.....with effect from

The Pension Number allotted to him/her is

DIRECTOR OF INFORMATION AND PUBLICITY

To
Thiru/Tmt/Selvi
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