

Grant In Aid Salary Employee Details

Note : Please read the Guidelines sent by Department before filling the form, in CAPITAL LETTERS in blue/ black ball point pen only. (Please avoid Short Forms and Abbreviations)

1.Key Employment Details	
1.1 Employee ID	<input type="text"/>
1.2 Employee Category	Regular <input type="checkbox"/> Re-Employed <input type="checkbox"/> Deputation <input type="checkbox"/> (Please provide the 1.2.1 Deputed from Department if Deputation is selected) (Please provide the 1.2.2 Re-employed is selected)
1.2.1 Deputed From Department	<input type="text"/>
1.2.2 Previous Employment Department:	<input type="text"/>
1.3 Surname (ఇంటి పేరు):	<input type="text"/>
1.4 Name	<input type="text"/> <input type="text"/> <input type="text"/>
1.5 Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
1.6 Father / Husband	Father <input type="checkbox"/> Husband <input type="checkbox"/>
Father / Husband Name	<input type="text"/>
1.7 Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (DD/MM/YYYY)
1.8 Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/> Widower <input type="checkbox"/>
1.9 Place of Birth:	District <input type="text"/> Mandal <input type="text"/> Village <input type="text"/>
1.10 Post/Designation at first appointment	<input type="text"/>
1.11 Place of Initial Appointment:	District <input type="text"/> Mandal <input type="text"/> Village <input type="text"/>
1.12 Initial Department:	<input type="text"/>
1.13 Details of localization as per presidential order:	District <input type="text"/> Mandal <input type="text"/> Village <input type="text"/>
1.14 Current Designation / Post	<input type="text"/>
1.5 Date of Entry into Service	<input type="text"/> / <input type="text"/> / <input type="text"/> (DD/MM/YYYY)
1.16 Office in Which Employee is Working	<input type="text"/>
1.17 Head of Account of Salary	<input type="text"/>
1.18 Source of Finance Need:	UGC <input type="checkbox"/> SELF FINANCE <input type="checkbox"/> USER CHARGES <input type="checkbox"/> DEVELOPMENT FUND <input type="checkbox"/>
1.19 DDO Code of Drawing Officer:	<input type="text"/>
1.20 Mobile No	<input type="text"/>
1.21 E-Mail Id	<input type="text"/>
1.22 Personal ID provided by Department:	<input type="text"/>

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1.23 Community	SC <input type="checkbox"/> ST <input type="checkbox"/> BC-A <input type="checkbox"/> BC-B <input type="checkbox"/> BC-C <input type="checkbox"/> BC-D <input type="checkbox"/> BC-E <input type="checkbox"/> Minority <input type="checkbox"/> Others <input type="checkbox"/>
2. Salary Details	
2.1 Scales Applicable	<input type="text"/>
2.2 Pay Scale	<input type="text"/>
2.3 Current Basic	<input type="text"/>
2.4 Next Date of Increment	<input type="text"/> / <input type="text"/> / <input type="text"/> (DD/MM/YYYY)
2.5 Special Pay	<input type="text"/>
2.6 Personal Pay	<input type="text"/>
2.7 Staying in Government quarter	Yes <input type="checkbox"/> No <input type="checkbox"/>
2.8 Standard Rent Paid	<input type="text"/>
3. Bank and Other key Details	
3.1 GPF No	<input type="text"/>
3.2 PRAN / CPS No	<input type="text"/>
3.3 APGLI Number	<input type="text"/>
3.4 ZPF Number	<input type="text"/>
3.5 Aadhar No	<input type="text"/>
3.6 PAN	<input type="text"/>
3.7 Bank Name	<input type="text"/>
3.8 District of the Bank Branch	<input type="text"/>
3.9 Bank Branch	<input type="text"/>
3.10 Bank A/C No	<input type="text"/>
3.11 IFS Code	<input type="text"/>

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Deductions												
Loans												
NO	Deduction Description	Sanction Date Dd/mm/yyyy	Sanction Ref. No	Sanctioned Amount	Loan No	First Month Adjustment Amount	Total no of Instalments	Interest Instalments	Interest Rate	Instalment Amount	Recovery Start MM/YYYY	Remarks
1												
2												
LIC												
	Policy No	Sum Assured	Monthly Premium	Date of Last Instalment.	Recover Start Month/Year							
1												
2												
Allowances						<u>Declaration</u>						
No	Allowances	Amount	Percentage of Basic(%)	Periodicity (Month/Quarterly/ Half yearly/Yearly)	<p>The above information is true to the best of my knowledge. I agree to share details of self and family with Government of Andhra Pradesh. I am aware that declaration of wrong details will entail disciplinary action against me</p> <p style="text-align: center;">_____</p> <p>Date : (Employee Signature)</p>							
1												
2												
3												
4												

*Please take additional printouts if required and attach the same to the application.

Date :

(DDO's Signature)