



SILIGURI PRIMARY SCHOOL COUNCIL

SILIGURI EDUCATIONAL DISTRICT

63, Rash Behari Sarani, Hakimpara, Siliguri – 734001

Application for REFUNDABLE LOAN from the Provident Fund Account

1. (a) Name of the applicant (Teacher) : _____
(in BLOCK capitals)
- (b) Date of 1st appointment : _____
- (c) Basic pay _____
2. Name of School where working : _____
3. Provident Fund Account number : _____
4. (a) Whether he/she has been granted loan previously : _____
- (b) If granted, state : i) Amount of Loan sanctioned : Rs. _____
- ii) Month & year in which the Loan fully repaid : _____
5. Purpose for which Loan prayed for : _____
(A loan may be granted for Medical Treatment of the depositor or his/her spouse, children and for death/ marriage only)
6. Amount of Loan prayed for : Rs. _____
(Amount in words should also be written)
7. Name of the Bank : _____
8. Name of Branch : _____
9. P.T. A/c No. _____
10. DECLARATION : I, Sri/Smt. _____ teacher of _____ School, hereby, declare that the entries above are correct and I accept the loan on conditions as laid down by the Primary School Council in this regard. The Board is, hereby, authorized to realize deduction of the loan in 12/24 equal monthly instalments.

Signature

Designation _____

School _____

Address _____

Phone No. _____

P.O. _____ Dist. _____

N.B. The application duly filled in should be submitted to the circle Inspector of Schools concerned, along with necessary enclosures. No application will be entertained if the above particulars are incomplete. Applications for P.F. Loan sent directly to this office will not be accepted or attended to.

FOR USE IN CIRCLE INSPECTOR'S OFFICE

REMARKS of the Circle Inspector of Schools

The particulars stated above by the applicant have been verified and found *correct/not correct. The case is therefore, recommended for _____

Sub Inspector of Schools
Circle

* Strike out whichever is inapplicable.
