

**EMPLOYEES' PROVIDENT FUND – EMPLOYEES' RECORD CARD**

E.P.F. 1

FORM **A**

***PART I***

Full Name \_\_\_\_\_ Employer's No. \_\_\_\_\_  
\_\_\_\_\_

Other Names \_\_\_\_\_ Member's No. \_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_

Nationality \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth\* \_\_\_\_\_ Place of Birth \_\_\_\_\_

Married or Single \_\_\_\_\_ Name of Spouse \_\_\_\_\_  
\_\_\_\_\_

Name and Place of Birth of Father \_\_\_\_\_ Name of Mother \_\_\_\_\_  
\_\_\_\_\_

Name and Place of Parental Grandfather } _____ _____	Name of Maternal Grandfather } _____ _____
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Name and address of last Employer } _____ _____	National Identity Card Number } _____ _____
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Nature of Employment \_\_\_\_\_ Period Employed \_\_\_\_\_

IDENTITY : (Give your thumb marks and Numbers of Available documents) (1) National Savings Bank Book (2) Post Office Identity Card (3) Ceylon Savings Bank Book (4) Certificate of Competence to drive (5) Temporary Residence permit (6) Citizenship registration (7) Passport	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;">Left Thumb Mark</td> <td style="width: 50%; text-align: center;">Right Thumb Mark</td> </tr> <tr> <td style="height: 100px;"> </td> <td style="height: 100px;"> </td> </tr> </table>	Left Thumb Mark	Right Thumb Mark		
Left Thumb Mark	Right Thumb Mark				

Any Natural distinguishing marks

\* Give Serial No. of birth registration if available – estates only.

Name of Nominee	Age	Relationship	Share
<p style="text-align: right;">..... Usual signature</p>			

***PART II***

Present Employer and address \_\_\_\_\_

Nature of Employment \_\_\_\_\_ Date employed from \_\_\_\_\_ Rate of Pay \_\_\_\_\_

I hereby declare that the foregoing is an accurate record of the information furnished by the employee and that it has been verified from my records as far as it has been possible to do so. I hereby further certify that the thumb marks and signature were placed in my presence.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature and Designation of Employer or his Representative

***PART III***

FOR OFFICE USE ONLY