



## INDIAN INSTITUTE OF TECHNOLOGY DELHI

### BENEVOLENT FUND SCHEME FORM FOR NOMINATION BY STUDENTS

I hereby nominate the person mentioned below, who is a member of my family, to receive amount of out-right "grant" as per prescribed rate laid down in the Benevolent Fund Scheme Rules (BFSR) in the event of my death due to an accident while undergoing studies at the Institute.

Name and Address of the Nominee	<i>Relationship with member-student of BFSR</i>	<i>Age</i>

Dated this \_\_\_\_\_ day of \_\_\_\_\_ at IIT Delhi, New Delhi-110 016.

\_\_\_\_\_  
Signature of Member-student of Benevolent Fund

Entry No.: \_\_\_\_\_ Student Name: \_\_\_\_\_

#### Witnesses to the signature of the Member-student:

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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#### For official use

Accepted \_\_\_\_\_

Signatures \_\_\_\_\_

Designation \_\_\_\_\_

**Form G**



**INDIAN INSTITUTE OF TECHNOLOGY DELHI**

**INSURANCE SCHEME OF IIT DELHI  
FORM FOR NOMINATION BY STUDENT**

Name of Student \_\_\_\_\_

Entry No. \_\_\_\_\_

Programme \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I, having been covered, under the Insurance Scheme of I.I.T. Delhi, hereby nominate the persons mentioned below, who are members of my family to receive the amount of insurance in the event of my death.

<u>Name and address of</u>	<u>Relationship with student</u>	<u>Age</u>
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<b>1<sup>st</sup> Nominee</b> _____	_____	_____
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\_\_\_\_\_

<b>2<sup>nd</sup> Nominee</b> _____	_____	_____
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\_\_\_\_\_

\_\_\_\_\_  
(Date) \_\_\_\_\_ Signature of student \_\_\_\_\_

Present Address \_\_\_\_\_  
(of student)

\_\_\_\_\_

**Witness signatures (other than nominee)**

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

(in capitals)

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

(in capitals)

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_