



Composite Declaration Form -11

(To be retained by the employer for future reference)

EMPLOYEES' PROVIDENT FUND ORGANISATION

Employees' Provident Funds Scheme, 1952 (Paragraph 34 & 57) &

Employees' Pension Scheme, 1995 (Paragraph 24)

(Declaration by a person taking up employment in any establishment on which EPF Scheme, 1952 and /or EPS, 1995 is applicable)

1	Name of the member							
2	Father's Name <input type="checkbox"/>	Spouse's Name <input type="checkbox"/>						
3	Date of Birth: (DD / MM / YYYY)							
4	Gender: (Male/Female/Transgender)							
5	Marital Status: (Married/Unmarried/Widow/Widower/Divorcee)							
6	(a) Email ID:							
	(b) Mobile No.:							
7	Present employment details: Date of joining in the current establishment (DD/MM/YYYY)							
8	KYC Details: (attach self attested copies of following KYCs)							
	a) Bank Account No. :							
	b) IFS Code of the branch:							
	c) AADHAR Number							
	d) Permanent Account Number (PAN), if available							
9	Whether earlier a member of Employees' Provident Fund Scheme, 1952		Yes / No					
10	Whether earlier a member of Employees' Pension Scheme, 1995		Yes / No					
11	Previous employment details: [if Yes to 9 AND/OR 10 above] – Un-exempted							
	Establishment Name & Address	Universal Account Number	PF Account Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	PPO Number (if issued)	Non Contributory Period (NCP) Days
12	Previous employment details: [if Yes to 9 AND/OR 10 above] – For Exempted Trusts							
	Name & Address of the Trust	UAN	Member EPS A/c Number	Date of joining (DD/MM/YYYY)	Date of exit (DD/MM/YYYY)	Scheme Certificate No. (if issued)	Non Contributory Period (NCP) Days	
13	a) International Worker:		Yes / No					
	b) If yes, state country of origin (India/Name of other country)							
	c) Passport No.							
	d) Validity of passport [(DD/MM/YYYY) to (DD/MM/YYYY)]							

UNDERTAKING

- 1) Certified that the particulars are true to the best of my knowledge.
- 2) I authorize EPFO to use my Aadhar for verification/authentication/e-KYC purpose for service delivery.
- 3) Kindly transfer the funds and service details, if applicable, from the previous PF account as declared above to the present P.F. Account as I am an Aadhar verified employee in my previous PF Account.*
- 4) In case of changes in above details, the same will be intimated to employer at the earliest.

Date:
Place:

Signature of Member

DECLARATION BY PRESENT EMPLOYER

- A. The member Mr/Ms/Mrs has joined on and has been allotted PF No. and UAN.....
- B. In case the person was earlier not a member of EPF Scheme, 1952 and EPS, 1995:
- **Please Tick the Appropriate Option:**
 - ☐ The KYC details of the above member in the UAN database Have not been uploaded
 - ☐ Have been uploaded but not approved
 - ☐ Have been uploaded and approved with DSC/e-sign.
- C. In case the person was earlier a member of EPF Scheme, 1952 and EPS, 1995:
- **Please Tick the Appropriate Option:-**
 - ☐ The KYC details of the above member in the UAN database have been approved with E-sign/Digital Signature Certificate and transfer request has been generated on portal.
 - ☐ The previous Account of the member is not Aadhar verified and hence physical transfer form shall be initiated.

Date:

Signature of Employer with Seal of
Establishment

*Auto transfer of previous PF account would be possible in respect of Aadhar verified employees only. Other employees are requested to file physical claim (Form-13) for transfer of account from the previous establishment.

Instructions for completing the Declaration Form 11

The Employee Provident Fund Form 11 needs to be completed by all new joiners to Open Text. To ensure smooth and timely processing, please ensure to follow these instructions:

- This is a pdf writable form. Please fill the form in legible and block letters only. Do not Print and scan.
- Please complete the form in English.
- Please do not include your title (Mr/Ms/Mrs) in any of the fields relating to you, your spouse's, father's etc name.

To assist you in completion of this form, please follow the below instruction:

#1, #2, #3, #4 : Please fill these details as per Aadhaar Card

#5 : Marital Status

#6: Please provide your personal email address and mobile number on which formal communication can be established

#7: Date of Joining at Open Text entity

#8: KYC Details and the Copies of same

#9: To be ticked 'YES' only if earlier you held a PF account with previous employer

#10: To be ticked 'YES' only if earlier you held a EPS account with previous employer.

#11: Previous Employer Details

- a) Establishment Name and Address
- b) Universal Account Number (UAN)

UAN is 12 digit number which has been allotted by EPFO and provided to the EPF member through employer. To check whether you have been allotted UAN against your PF member ID, please go to the UAN Member e-sewa on EPFO website www.epfindia.gov.in and click on **Know your UAN status**.

- c) Please enter your Previous employment P.F. member ID (Example below):

REGION CODE	OFFICE CODE	ESTABLISHMENT ID	EXTENSION	ACCOUNT NUMBER
MH	BAN	12345	000	123

- d) Date of joining (DD/MM/YYYY) i.e. Date on which member has started to work in the previous establishment.
- e) Date of Exit (i.e. Date on which member has ceased to work in the previous establishment)
- f) Scheme Certificate No. if issued
- g) PPO Number if issued
- h) Noncontributory period (NCP) Days

#12: Previous Employer Details in case of Trust

- a) Name and Address of Trust
- b) Universal Account Number (UAN)

UAN is 12 digit number which has been allotted by EPFO and provided to the EPF member through employer. To check whether you have been allotted UAN against your PF member ID, please go to the UAN Member e-sewa on EPFO website www.epfindia.gov.in and click on **Know your UAN status**.

- c) Please enter your Previous employment E.P.S. member ID (Example below): Refer to your payslip

REGION CODE	OFFICE CODE	ESTABLISHMENT ID	EXTENSION	ACCOUNT NUMBER
MH	BAN	12345	000	123

- d) Date of joining (DD/MM/YYYY) i.e. Date on which member has started to work in the previous establishment.
- e) Date of Exit (i.e. Date on which member has ceased to work in the previous establishment)
- f) Scheme Certificate No. if issued
- g) Noncontributory period (NCP) Days

#13: International Worker Declaration – Applicable if individual has other than Indian passport

Undertaking: This section needs to be filled in wet ink.
Please fill the date, place and provide wet signature in the space provided.

Declaration by Present Employer: DO NOT fill anything in this section