

ANNEXURE A

APPLICATION NO. ----- (To be filled by EPFO)

APPLICATION FORM FOR EMPANELMENT IN EPFO
(TO BE FILLED IN BY ALL APPLICANT ADVOCATES)

To,

Regional Provident Fund Commissioner-I (Legal),
Head office, Employees' Provident Fund Organisation,
Bhavishya Nidhi Bhawan,
14 Bhikaiji Cama Place, New Delhi – 110066.
Telephone:- -01126172677

Name (in Block letter)	
Father's name	
Court for which applied	

CHECKLIST

List of documents attached (please ✓)
Copy of all certificates & mark – sheets (Xth. onwards)
Experience Certificate
Duly filed Annexure-A & B
Others (Please specify):1.

2.

PERSONAL DETAILS (IN Block Letters)		
1.	Name in FULL	
2.	Father's/ Husband's Name	
3.	Date of Birth	
4.	Age on (last Date of receipt of application)	

5.	Nationality	
6.	Marital Status	
7.	Address for correspondence with PIN and Phone	
8.	Permanent Address with PIN and Phone	
9.	Address of office/chamber, if any, with PIN and Phone	
10.	Mobile Number(s)	
10	Email ID:	
11	Are you related to any EPFO employee? If so, please give details (Viz. Name, Designation, place of work & relationship with the applicant):	

12. Details of Educational qualification (Commencing with the Matriculation or equivalent examination)

Examinations Passed	Name of the Board/University	Class or division	% of Marks	Subjects	Year of passing
10 th / Matriculation					
12 th / Intermediate					
Graduation					
LLB/Law Graduate Degree					
Post-Graduation					
Other Professional Qualifications					

13. Whether the applicant is currently on the Panel of any other Government Department/PSU/Statutory Body/Autonomous Body etc., and if yes, the details below (Self- certified Copy of the Office Order/letter of empanelment may be attached):-

Name of the Department/PSU/Statutory Body/Autonomous Body	From	To
1.		
2.		

14. Whether the applicant has worked as Legal Researcher (LR) attached to any Court/judge? If yes, the details and the supporting documents:-

Name of Court/judge	Period of Research	Supporting documents
1.		
2.		

15. If one or more advocates are associated as juniors of the applicant, their details be provided below:-

Sl. No.	Name of the advocate	Enrolment no. with date

16. Infrastructural facilities available with the applicant (please tick if available) be provided below:

Sl. No.	Office space	Office clerk	Steno/typist	Support staff

17. No. of Cases relating to EPF and MP Act'1952, if handled earlier:-

Sl. No.	Title of case (Documentary proof must be attached)

18. Whether the applicant has been engaged (through Vakalatnama) as counsel in any landmark or mother case? If yes, the particulars of the case with copy of the judgment wherein his/her name is recorded as advocate for one of the parties (Copy of order/judgement be attached as proof):-

Name of the Court	Case title	Nature of Judgment

19. Whether Income Tax return is being filed for last five years? Yes/No (If yes, please attach copies of ITRs.)

20. Details of Bank Account/Aadhar Number be provided below:-

Bank Account Details(Bank, Account Number, Address of the branch and IFSC code)	PAN number	Aadhar Number

21. Whether any proceeding has ever been commenced or is continuing before the Disciplinary Committee of the Bar Council for alleged professional misconduct:-

Sl. No.	Details of allegations and Proceedings	Finding made by the Disciplinary Committee.

22. Whether any criminal complaint has ever been filed or FIR registered or any criminal proceeding has ever commenced against the applicant advocate:-

Sl. No.	Details of allegations and Proceedings	Finding made by the Court

23. Any additional professional qualification(s), which will further the candidature, including membership of professional societies, awards and honours etc. may be listed in the box below. (Documentary proofs may be attached):

UNDERTAKING

- 1) I hereby confirm and declare that the information furnished in the application and in the attached Certificate is true/correct and complete to the best of my knowledge and belief. I have not concealed any relevant information. I am fully aware that if any of the information furnished by me is found to be false/ incorrect, my candidature for the empanelment will be treated as cancelled and matter will be referred to the appropriate authority.
- 2) I also undertake to maintain absolute secrecy about the cases of the EPFO as required under the Act, Rules and Regulations thereunder.
- 3) I also undertake to return all case files and records to the EPFO as and when required by EPFO.
- 4) I agree with the Fee Schedule notified by EPFO.

Signature of Advocate
Enrolment Number
Mobile Number

Place and Date:-