

ROYAL CIVIL SERVICE COMMISSION ROYAL GOVERNMENT OF BHUTAN CSWS CLAIM FORM

1.	Information about the deceased Full name: CID no.: Date of death (dd/mm/yyyy): If member, provide the information below: EID no.: Agency:
	 Tick ONLY one whichever is applicable: 1. Member 2. Superannuated member 3. Dependent (only if not 1 or 2)
2.	Information about the claimant Full name: CID no.: Mobile no.: Relationship to the deceased: Name of the bank/branch: Bank account no.: If member, provide the information below: EID no.: Agency:
	Attach the death certificate OR a statement from the Gup certifying the death.
I, ł	Undertaking: nereby do confirm that the above information is true to the best of my knowledge. In the event e above declaration is found to be incorrect, I shall be liable for action as per the law of the land.
	Sd/ ace: (Legal stamp) te: Signature

For official use only

Verification by the HR Officer:

Crosscheck the following documents (photocopy) as applicable:

- 1. Citizenship Identity Card of the claimant
- 2. Citizenship Identity Card of the deceased
- 3. Marriage Certificate in case of a claim is being made for the spouse or the photocopy of the letter from the court in lieu of the Marriage Certificate
- 4. Family Tree from the Dept. of Civil Registration & Census reflecting the CID number allotted to the child in the case of claim being made for the child aged one year and above and 15 years and below
- 5. Birth Certificate or Health Card in case of a claim is being made for a child aged one year and below
- 6. Legal adoption paper from the NCWC (for adopted child)
- 7. CSWS Lifetime Membership Certificate in case of a claim by and for the superannuated member

Date Name Signature Official seal

Approval by the Head of the Agency

Date Name Signature Official seal