

UNIFIED PENSION SCHEME (UPS) – SUBSCRIBER MIGRATION FORM - Government Sector**[See Regulation 4]****Exercise of Option by an eligible Central Government employee presently subscribed to National Pension System (NPS) For being covered under Unified Pension Scheme (UPS)****Protean eGov Technologies Limited (formerly NSDL e- Governance Infrastructure Ltd.)**

I, Son/ Daughter of Mr/Mrs. being a subscriber of NPS as on 01/04/2025 with permanent retirement account number (PRAN) having read and fully understood the provisions of Unified Pension Scheme (UPS) as notified by Central Government vide notification F.No. FX-1/3/2024-PR dated 24/01/2025 and PFRDA (Operationalisation of Unified Pension Scheme under National Pension System) Regulations, 2025 as amended from time to time, and being eligible to opt for Unified Pension Scheme, do hereby exercise the option to be covered under Unified Pension Scheme (UPS).

I authorize the CRA, NPS Trust or any other entity connected with UPS to collect and share data / details of my necessary personal information for the purpose of the said scheme regulated under the PFRDA Act, 2013 and the relevant regulations notified thereunder.

Signature / Thumb Impression* of Applicant

(*LTI in case of males and RTI in case of females to be provided. Toe impression in case no hands)

Place : _____

Date

D	D	M	M	Y	Y	Y	Y
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(To be filled and certified by the DDO based on Service records)

Employment Details (At the time of exercise of UPS option)									
Employee Code/ID									
Date of commencement of qualifying service (Qualifying Service as defined in Regulation 2(k) read with Regulation 13)	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Current Month Basic Pay									
Non-Practicing Allowance (NPA), if applicable									
Schedule date for next increment	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		

Signature & Name of DDO	Signature & Name of PAO
DDO Reg. No.	PAO Reg. No.
Date : _____ Place : _____	Date : _____ Place : _____

Note/Instruction:

- The duly signed copy of this Form shall be kept DDO in employee's service record and a copy of the same shall be provided to the employee for his record.
- DDO shall input the Head of Office verified data in the Central Record Keeping System and in case of physical submission of form by the subscriber, the DDO shall upload a copy of this duly signed option form. PAO shall authorise and approve the option exercised by the subscriber in the CRA system through their login.