***Form 3.3***

ROYAL CIVIL SERVICE COMMISSION

Civil Servants’ Welfare Scheme

**Nomination/Update Form**

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

1. **Information about the member**

* Full name: EID no.:
* Position Title & Level: Gender:
* Agency: CID no.:
* e-mail id.: Contact #:

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

1. **Information about the direct dependent(s):**

Direct dependants comprise of one’s own biological parents, a spouse, and child(ren), including legally adopted, if the member does not have biological child.

*(Dependent in sl. # 1 is the primary nominee)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl. #** | **Name** | **CID number** | **Date of birth** | **Relationship** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

*(Add rows if required)*

The member must attach the photocopy of the following documents:

1. Citizenship identity card of the member;
2. Marriage Certificate of the member;
3. Citizenship identity card of dependents (except for child below the age of 15 years);
4. Family Tree from the Dept. of Civil Registration & Census reflecting the CID number allotted to the child aged one year and above and 15 years and below; and
5. Birth Certificate/Health Card of children (aged 1 year and below).
6. **Undertaking:**

I, hereby do confirm that the above list of nominees are my authentic dependants.

Sd/

Place: (Legal stamp)

Date: Signature

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

**For official use:**

**Verified by the HR Officer: Approved by the Head of the Agency:**

Date Date

Name Name

Signature Signature

Official seal Official seal