

PSF 21



THE REPUBLIC OF UGANDA

Attach coloured passport size photograph here

APPLICATION FOR PENSION [TEACHERS AND TRADITIONAL PUBLIC OFFICERS]

To:.....

.....

.....

From: Ministry/Department/Local Government.....

- 1. Part A of this form should be filled by the Responsible Officer
2. Part B of this should be filled by the applicant.
3. Submission of wrong information may lead to prosecution in accordance with the Penal Code Act.

PART A

PERSONAL INFORMATION OF THE APPLICANT

- 1. Names in capital letters (Surname first).....
2. Date of Birth: DD MM YYYY
3. Last Appointment held
4. Salary scale..... Salary Per Annum.....
5. Date of retirement: DD MM YYYY
6. Date of First Appointment: DD MM YYYY
7. Date of Last Appointment: DD MM YYYY
8. Registration Number /Force Number (where applicable).....

9. Reason for Retirement:.....

10. Last Duty Station.....
(Ministry, Department/Local Government/School)

PARTICULARS OF SERVICE

11. Record of Pensionable Service

Post Held	Salary Scale	Basic Salary PA	From (DD/MM/YYYY)	To (DD/MM/YYYY)

12. Record of Previous Non – Pensionable Service

Post Held	Salary Scale	Basic Salary PA	Type of service	From (DD/MM/YYYY)	To (DD/MM/YYYY)

13. Record of Breaks in Service and Leave of absence other than on Full Pay

From	To	Reason

OUTSTANDING FINANCIAL LIABILITY

14. Under this Section, Accounting Officers should indicate any financial obligation (salary advance, salary loan etc.) not yet settled by the public officer.

Type of Liability	Amount (Ug Shs)	Beneficiary (e.g. Government, Credit Institution, Saving Society etc.)
Total outstanding liability		

Declaration by the Accounting Officer

15. I certify that the information given in Part A of this form is correct to the best of my knowledge and belief

Name..... Designation.....

Signature..... Date.....

PART B: (TO BE FILLED BY THE APPLICANT)

1. Contact Address

District	
Sub County/ Division	
Village	
L.C.1	
Postal Address	
Telephone Number	
Email	

2. Members of immediate Family

(i) Spouse(s) (where applicable)

Name	Contact

(ii) Children

Children's Names (Put extra names overleaf if necessary)	Date of Birth

3. Bank Details: My pension/gratuity should be to the credit of my account at:

Bank	
Branch	
Account Title	
Account Number	

4. Declaration:

I certify that the given in Part B of this form is correct to the best of my knowledge and belief.

Name.....Designation

Signature.....Date

ATTACHMENTS TO THIS FORM

- (i) First Appointment letter;
- (ii) Confirmation letter;
- (iii) Promotion letters (if any);
- (iv) Last pay slip;
- (v) Letters of acceptance of retirement or directing removal from the service;
- (vi) Certificate of registration for Teachers;
- (vii) Provisional Bank Statement; and
- (viii) Forwarding letter.