



ཀྲུལ་ཡོངས་དགོངས་ལཱ་ལྷན་ཁྲུང་ཕོགས་དང་འཚོ་རྩིན་མ་དངུལ་།།

**NATIONAL PENSION & PROVIDENT FUND
THIMPHU: BHUTAN**

STUDENT LOAN SCHEME

Documents Required

A) Applicant

1. Student Loan Application Form to be submitted in soft copy
2. A copy of Citizenship ID card to be submitted in soft copy
3. One passport size photograph
4. Admission Letter
5. Fee structure
6. Letter of Guarantee from the Guarantor to be executed in NPPF
7. Last qualifying certificates
8. Compulsory loan protection insurance form duly signed (Page 6 of loan application form)

B) Guarantor

1. A copy of Citizenship ID card
2. One passport size photograph
3. Undertaking from respective Departments (Page 5 of loan application form)

C) Mortgage (Fixed Assets)

1. Lag Thram/ Ownership Certificate
2. Citizenship ID copy of property owner
3. One passport size photograph of the property owner
4. Letter of Guarantee

**PABX : 324140 / 325758 / 325638 / 325512 / 334788 (PF) / 334787 (CREDIT) / 323233 /328179 (RE)
FAX : 324306 / 334790 / 337179/ 334786, P.O. Box No. 1046, THIMPHU
WEBSITE : <http://www.nppf.org.bt>, E-mail: npb@druknet.bt
HOTLINE No- 139 SMS SIM No. 1101 or 17117371**



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**NATIONAL PENSION & PROVIDENT FUND
THIMPHU: BHUTAN**

GUARANTOR DETAILS

1. Personal Details

Name : CID No:

Sex : Male Female NPPF No:.....

Father's Name :

Date of Birth :

Married: Yes No Name of Spouse:

Date of Joining Service: Date of Retirement:

Relationship with the applicant:.....

2. Permanent Address

Village : Dzongkhag :

Gewog : House No :

Thram No :

Customer ID No. (if you are existing customer of NPPF).....

Telephone No: Home: Office:..... Mobile No.:.....

Fax No: E-mail Address:

3. Present Address

Department Name:.....

Employee ID:..... Designation/Position:.....

Telephone No: Home:.....Office:.....Mobile:.....

E-mail Address:.....

Signature of the Guarantor

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**NATIONAL PENSION & PROVIDENT FUND
THIMPHU: BHUTAN**

Departmental Undertaking

Date:

To,
National Pension & Provident Fund
Thimphu

Mr./Mrs./Miss.....a regular employee ofhas guaranteed the Student Loan of Nu. (Ngultrum.....) applied by Mr./Mrs./Miss..... from the National Pension and Provident Fund for pursuing higher studies. If the loan is sanctioned, we hereby undertake to deduct the monthly installment from his/her salary and remit it to the Fund until the loan is fully liquidated upon receiving intimation from the NPPF advising us to remit the loan installment.

In the event of the employee (Guarantor) being suspended or resigning/absconding/death or being terminated from the service, we hereby undertake to recover the loan outstanding from his/her accumulated service benefits including Gratuity. In case of transfer of the employee, we shall inform the concerned department to deduct the monthly installment and remit it to the Fund without fail.

His/her employment information/salary structure is as follows: - (to be filled by Accounts Division)

Designation.....	NPPF A/c no.....
Grade.....	Joining Date.....
Earnings: Basic pay.....AllowanceGross pay.....	
<u>Deductions:</u>	
P/F.....	Salary Tax.....
House Rent.....	Health Tax.....
Housing Loan.....	Vehicle Loan.....
Others.....	Personal Loan.....
	Advance.....
Total Deduction.....	Net payable.....
Seal	
Accounts Officer	Name..... Signature.....

Legal Stamp

OFFICIAL SEAL

Signature & Seal of the Head of Department
Name.....
Address.....

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Proposal No.

LOAN PROTECTION INSURANCE PROPOSAL FORM

Name of the proposer	Citizenship I/Card
Mailing Address	Nationality.....
Email Address.....	Phone /Mobile No.....
Gender: Male/ Female	Occupation
Proposer Date of Birth.....	Loan From.....

Sum Insured/Loan Amount Nu.....

Total Premium Nu.....

If the proposer wishes to nominate a person to whom the money secured by the policy applied for are paid to in the event of your misfortune, please mention the name of the nominee/s

Name of the nominee	I/Card No	Relationship	Age	%share.

SI. No.	Benefits	Sum Insured (Maximum Liability)
i	Death of Insured Person on account of Accident or Misfortune	Sum insured or principal loan balance whichever is less
ii	Permanent Total Disability of Insured Person on account of Accident	-do-
iii	Natural death of insured Person	-do-
iv	Termination from College/University or from the service	50% of the sum assured or Principal loan balance whichever is less

I hereby warrant and declare the truth of all the above statement and that I have not withheld any material information and I agree that this proposal shall be the basis of the contract between me and the Company, I agree to notify the Company of any material alteration in my occupation, health or habits to accept a policy subject to the terms, exceptions and condition as prescribed by the Company.

Risk to commence ondate.....

CLAIM PROCEDURE
 Claim to be intimated to BIL within 60 days from the date of Misfortune.

Signature of the proposer

