

Head Office, Shib Bari Road, Ward No.6, Coochbehar-736101

PUBLIC NOTICE

REGARDING IMPLEMENTATION OF COMPUTER INCREMENT IN REGIONAL RURAL BANKS (RRBs)

Under the directions of the Hon'ble Supreme Court vide order passed in Contempt Petition No. 1798/2018, the Government has reconsidered the decision to implement computer increment in Regional Rural Banks (RRBs) and has decided to give effect to it from 01.11.1993, Now, as per the instructions of the Ministry of Finance, Government of India, all those employees who were in Bank service on or before 01.11.1993 will be given the benefit of computer increment applicable from 01.11.1993

Therefore, through this public notice it is informed to all such employees, who were in the Bank's service on or before 01.11.1993 and are not currently drawing pay or pension, have been dismissed/deceased, have taken compulsory retirement/resigned or their legal heirs to apply for computer increment to their concerned Regional Office/Head Office through emails or personal visit. The last date for submission of application is 27.09.2024. Application form is available on Bank's website (www.ubkgb.org).

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General Manager-HRD UBKGB, Coochbehar

The General Manager-HRD Uttarbanga Kshetriya Gramin Bank Head Office, Coochbehar Respected Sir,

o fo	ormer employee of(Name of(Name of(Name of
, a to	ind consideration regarding the release of Computer
nk), humbly submit this representation for your ki	ind consideration regarding the release
rement Benefit. I was employed at the bank from	nas to services of the bank by resignation / Compulsory
. I have exited from the s	ismissal/removal/superannuation (Tick whichever is
tirement / Voluntary Retirement/termination/ di	istilissal/Tetrioval/Superariiraation (
plicable).	
earshy confirm that I was in services in said Bank as	s on 01-11-1993 or before. Therefore, I am eligible fo
e computer increment benefit as per the applicabl	le rules and policies.
view of my eligibility, I kindly request you to mak	ke the necessary arrangements for the release of the
omputer increment to me.	
Doubleslove	Details
Particulars	
Name	
UID/Emp.no/ any specified unique no by Bank	
Date of Joining & Designation	
Date of Exit & Designation	
Mode of Exit	
Details of Last Posting (Branch & Region)	
Details of JAIIB/CAIIB with Date of Passing	
Details of Promotion with effective date, if any	
Details of Punishment, if any	
Details of Suspension Period, if any	
Details of LOP, if any Details of Account no. & IFSC	in the second se
1	
Contact no.	

The General Manager-HRD Uttarbanga Kshetriya Gramin Bank Head Office, Coochbehar Respected Sir,

	elation) am legal representative of
	employee of(Name o
Bank), humbly submit this representation for your kind co	
Increment Benefit. My (relation) was	employed at the bank from a
toasby resignation / Compulsory Retirement	She/He exited from the services of the bank
dismissal/removal/superannuation (Tick whichever is appl	
I hereby confirm that she/he was in services in said Bank	as on 01-11-1993 or before Therefore He/Shi
was eligible for the computer increment benefit as per the	
was engine for the compater merement better as per the	applicable rates and policies.
In view of his/her eligibility, I kindly request you to make	the necessary arrangements for the release o
the computer increment on the name of	to me.
Particulars of Ex-Staff	Details
Name	
UID/Emp.no/ any specified unique no by Bank	
Date of Joining & Designation	
Date of Exit & Designation	' control of the cont
Mode of Exit	
Details of Last Posting (Branch & Region)	
Details of JAIIB/CAIIB with Date of Passing	
Details of Promotion, if any	
Details of Punishment, if any	
Details of Suspension Period, if any	
Details of LOP, if any	
Date of Death	
Name of Legal Representative	
Relation with ex-staff	3
Details of Account no. & IFSC of Legal Representative	
Contact no. of Legal Representative	
I hereby declare that the information given above and in my knowledge and belief and nothing has been conceale given by me is proved false/not true, then all the benefits	d therein. I understand that if the information
	Yours sincerel
	Place:
	Date:
	(Signature