



Circular

Circular No: PFRDA/2025/11/SUP-CG-SG/04

September 19, 2025

To,

All the stakeholders of NPS and UPS

Subject: Physical submission of 'Form A1' by New Joinees intending to opt for UPS by 30.09.2025 – reg.

The Unified Pension Scheme (UPS) has been notified by the Central Government vide notification F. No. FX-1/3/2024-PR, dated 24.01.2025 issued by Dept. of Financial Services, Ministry of Finance. Further, the PFRDA (Operationalization of the Unified Pension Scheme under NPS) Regulations, 2025 were notified on 19.03.2025 and the Central Civil Services (Implementation of Unified Pension Scheme under National Pension System) Rules, 2025 have been notified by DoPPW on 02.09.2025.

- 2. It has been observed that several New Joinees who entered Central Government service on or after 01.04.2025, and are posted at various locations, may not yet have submitted their form for generation of Permanent Retirement Account Number (PRAN).
- 3. In view of the impending deadline for exercising the option under the Unified Pension Scheme, i.e., 30th September, 2025, it is hereby brought to the attention of all concerned that:

All employees who joined Central Government service on or after 01.04.2025 and intend to opt for the Unified Pension Scheme may physically submit the duly filled Form A1 to their respective nodal offices/ or the Head of the training Institute/ or the Head of their current Institute, as applicable, on or before the specified due date. Thereafter, the Head of Institutes, shall be required to forward the same to the cadre controlling authority or the DDO, where the employees shall be posted.

4. A copy of the Form A1 is annexed to this circular for reference.

(Vikas Kumar Singh) Chief General Manager

Annexure: Form A1

Form A1

	UNIFIED PENSION SCHEME (UPS) – SUBSCRIBER REGISTRATION FORM - Government Sector Exercise of Option to be covered under Unified Pension Scheme (UPS) and to avail its Benefits																													
Exercise of O	ptio	on to	o b	e co	ver						Pe	nsi	on Sc	he	eme	e (UPS) aı	nd	to a	avai	lit	s Be	nef	its					
						Nar	ne	of	CR	A													1	Pact	e rec	ent				
Print my PRAN in Hindi			/es			No	I	lf y	es,	plea	se s	subi	nit de	eta	ils	as	per	Anı	ıex	kure	I		photograph of 3.5 cm x 2.5 cm							
Select your category [Please tick $()$] Central Government												size / passport																		
																									size					
To,																									not s					
National Pension Sys	tem	Tru	st																				ac		/ st		2 /			
Dear Sir/Madam,																														
I,	I																													
instructions page.)	ут	ieius	ь. г	Tea	se i	III UI	.6	IOH	111 1	II E	ngn	ISH	and	DΙ	ان	CN	. Iei	ters	()	Kere	er g	ene	rai	gui	Jem	ies	aı			
1. PERSONAL DET	`A II	LS:	$(R\epsilon$	efer	Sr	No 1	01	f th	e in	stru	ctic	ns)							II	SP A	nne	Y111	·e 11	if n	ame	,				
exceeds the space pro					D1.	. 10.	. 01			ibti G	Cuic	,113)								50 21	71110		C 11	., ,,	arric					
Salutation*					hri		15	Sm	t					ŀ	Kur	ma	ri										\neg			
Applicant Name*						-																								
Father's Name																														
Mother's Name																														
Orphan Status* Yes No																														
Either Father's or Mo	othe	r's r			ma	ndate	ory	*		Sele	ect 1	the	name	tc	ap	ope	ear			Fa	ther	.'s]	Mot	her'	's			
on PRAN Card* Name Name																														
Date of Birth*	d	d	n	n n	1	у у		у	У																					
Place of Birth*																														
Country of Birth*																														
PAN*													Vation	ali	ity	*														
Applicant Gender*		Ma	ıle		Fei	nale			Frai Stat	isge us*	nde	er			Μ	1ar	ital			J	Jnm	arri	ed		Ma	rrie	d			
Legally wedded Spor					Ma	ale		F	em:	ale		Tı	ansge	ene	der	· I	Lega	lly	we	edde	ed									
Gender (if married) *												S_1	ouse	D	OE	3 (if mo	arri	ed,	* (
Legally wedded Spor			e (i	f m	arrie	ed)*																								
Income Range (per a	nnu	m)		В	elov	N	1	la	c to	5		5 1	ac to	10)		0 la				25	lac	to		Ab	ove	1			
*			L		l lac			lac lac 25 lac 1 C													Cr									
Please Tick if Applic	cable	e				ally	ex	pos	sed				elated					ly			- 1	,		instı	ucti	on				
• PROCE OF UPEN	TOWN	DECK 7		_	rsor		N /3	200	w / v	20.4	<u>.</u>		pose									no.		. 30						
2. PROOF OF IDEN	VII	TY	anc	1 A I)DF	(ES	5 (I	PO.	1/1	POA	\)*	(Aı	•						_	g to	be :	sub	mit	ted)						
Passport			+	-	-	++	+	+	-	1	D.::-		Passi														 			
Driving License Government ID			+	-	-	++	+	Driving License Expiry Date Voter ID Card										 												
															vo	iter	מו י	Car	a								l			
Card CKYC Number	1	Щ		\top^{\perp}	\top	Н	4							1				Π	П	뀌	Н		\vdash	Т		ш	$\overline{}$			
National Population				+	+	\vdash	\dashv		 	H				┰		H	+	\vdash	-	+	+	+	+	+	+		\vdash			
Register																														
Proof of possession of	f			+	\vdash	I	ro	vid	e 12	st F	nır	Dic	its. R	ec	lact	t o	r bla	ck-	1)111	t fire	st 8	dio	its o	f the	Э. Д я	dha	ı			
Aadhaar	•												nitted																	
3. ADDRESS DETA	JLS	S*	_	_											- 12			1												
Line 1				Π										T		Г	T		Π	T	T	T	T							
Line 2														7	V	Ι	L	L	А	G	Е	/	С	Ι	Т	Y				

District															S	tate/	U.T															
Country	E DEE		~ .•.																P	IN	Cc	de										
4. CONTAC	T DETA	AIL:	5*								_																					
Mobile*											ĺ	Telep	hor	ne v	vith	STI) c	ode														
Email ID*																																
5. BANK DE	ETAILS	* (P	roof	to t	e s	ubr	nitte	ed -	- Re	fer	Sı	. No.	. 3 (of th	ne ii	ıstrı	ictio	ons))													
Account Typ	e		Sa	ving	Α/	С						Cur	ren	(A	c																	
Bank A/c Nu	mber																															
Bank Name	Bank Name															IFS	Сс	de														
I hereby decl	are that,	the	bank	acc	cou	nt d	etail	pr	rovi	ded	ar	e sal	ary	ban	k a	ccou	ınt.															
6. SELECTI	ON OF	PE	NSI	ON	FU	ND	(P)	F).	AN]	D I	N	VES	ΓМ	EN	T (CHC	OIC	E*	(R	efe	r S	r n	o. 4	of	`the	Э						
instructions)																																
.	k						ern	(pe	ensi	on	fu	nds a	and	inv	est	mei	nt F	att	ern	as	d	eter	mi	ne	d by	y tl	he					
Please Tick (√) one			tho	_		1				_		Г	1	1							/D1			1	4.1	1					
	Pensio	on L						_		•	e.	nsion	r	na	ana							•							9)			
Aditya E						se i					n l	Fund	M	mt		III	ves	ше	ш	CII	101	pice (Please Tick ($$) one)										
Mgmt Lt			1 011	DIOI			Li	mi	ted					5****																		
DSP Per							ı				io	n Fur	nd			Ac	tive	e Cł	oio	ce (i.e	. 10)0%	ó ir	ı Go	ovt						
Manager					+				ıt Lt	td Securities Iahindra Pension										ties)												
ICICI Pr Funds M			18101	1			ı		к М l Ltd		nd	ira Pe	nsı	on								01	r									
					1						ens	sion I	∃un	d								С	Conservative									
LIC Pen	sion Fun	id L	imit	ed			l		ıt Lt							۸,	ıto	Ch	sio.	2	L		(LC25)									
SBI Pen	sion Fun	ds F	Priva	ate			TATA Pension Management									Auto Choice							Moderate									
Limited		1.7	,	1			Pri	vat	te Lt	d													(LC50)									
UTI Pen If no Pattern					4		1	11 1-			.4.~	م م ام		J.C	1 ₄	Dat	4															
																			(TC			a		_	0.41							
7. FATCA* (I instruction):	Foreign	Acc	oun	t Ta	IX (Con	aplı	an	ce A	(ct) &	& CR	S I	EC	JL/A	KKA	П	UN	(F	tete	er	Srı	10.	5 ()1 tl	ne						
I am a tax resi	dent of I	ndis	ano	l not	res	eide	nt o	fa	nv.			La	m a	tav	rec	ider	of O	f the	2 00	un	tro	lies	m	ent	ion	ed		T				
other country	ident of i	iidic	i and	<i>a</i> 1101	110	siuc	111 0	ı u	iiy				ow	шл	. 103	iaci	ii O.	LIIV		Juli	uу	/103	, 1110	2116	IOIIV	cu						
US Person												Y	20								lo											
Particulars														(1)		1		10111	a terr			$\overline{}$			Cor	ıntı	m: (2)				
raiticulais	G	/				т.						Coun	иу	(1)				our	ıuy	(2	<u>) </u>	+			Cou	HILL	у (<u> </u>				
	Count Reside		oun	tries	OI	Tax	ζ.																									
	reside	oney			Δ d.	dres	s Li	ne	. 1																							
Address in	the						own,		. 1																							
jurisdiction fo						lage																										
Residence State																					_											
ZIP/Post Code							e																									
Tax Identification Number (TIN)/Functional equivalent Number																																
TIN/ Function Country		aler	nt N	umb	er l	Issu	ing																									
Validity of documentary evidence provided (Wherever applicable)						ddmmyyyy								ddmmyyyy							ddmmyyyy											

Signature / Thumb

I have understood the information requirement of the Form (read along with the FATCA / CRS Instructions and Terms & Conditions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete and hereby accept the same. Signature Impress Applica instructions												sion* nt (re	of fer							
8. DECLARATION BY	APF	LI	CA	NT*	(Re	fer	Sr n	no. 6 of the i	nst	ructic	ns)									
I have read and understood the terms and conditions of the Unified Pension Scheme (UPS). The information and documents furnished by me are true and correct, to the best of my knowledge. Any changes in the information furnished by me shall be informed to CRA / NPS Trust. I understand that I shall be fully liable for submission of any false or incorrect information or documents.																				
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.																				
Declaration under the P	rev	ent	ion	of M	Ione	y L	aur	ndering Act	, 20	002										
Declaration under the Prevention of Money Laundering Act, 2002 I hereby declare that the contribution paid by me/on my behalf has been derived from legally declared and assessed sources of income. I understand that NPS Trust has the right to peruse my financial profile or share the information, with other government authorities. I further agree that NPS Trust has the right to close my PRAN in case I am found violating the provisions of any law relating to prevention of money laundering. (*LTI in case of males and RTI in case of females to be provided. To impression in case no hands)													ΓI in . Toe							
Date	ION)A	[, ()	FFI		lace		Mark field	s aı	re Ma	nd	ato	rv)							
Employment Details (A													- 3 /							
Date of joining*	Date of							f Superannı	ati	on*										
Date of commencement of	of qu	ıali	fyin	g ser	rvice	*														
Employee Code/ID*														<u> </u>					1	
Post (Optional)																				
Group (Optional)	A		B (G	azett	ted)			(non- azetted)		(•		Б)		Е		othe	er	
Service(Optional)	ΙA	S		J	IPS			IFS		C	iroı	up A	A		Gr	ou	рΒ		othe	r
Basic Pay*																				
Pay Scale (Optional)																				
Name of the office*																				
Department*																				
Ministry*																				
DDO Registration Number*										/ CD stratio										

*Qualifying Service as defined in Regulation 2(k) read with Regulation 13 of PFRDA (Operationalisation of Unified Pension Scheme under NPS) Regulations, 2025.

Name of DDO						N	Jame	e of	f P	AC)											
Signature of DDO						s	ligna	ıtur	·e o	of F	PAC)										
DDO Code No. (As per record in CRA System)								PAO Code No. (As per record in CRA System)														
Seal of DDO						s	leal (of I	PΑ	О												
Date						Ι	ate															
Place						P	lace	:														
		AC	KN	10	WL	ED	GE	MI	EN	T												
Name of the Subscriber																						
Date of Receipt of Application:																						

INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

General guidelines

- (a) Please fill in legible handwriting to avoid errors. Do not overwrite. Corrections should be countersigned by the applicant. Applications incomplete in any aspect (or) if mandatory fields are left blank (or) with unclear photograph (or) not accompanied by required documents (or) not authenticated by the Nodal Office are liable to be rejected.
- (b) Copies of documents submitted by the applicant should be self-attested.
- (c) Applicant is advised to retain the acknowledgement slip signed / stamped by the designated nodal officer where they submit the application.

SI	Item No	Item Details	Instructions
		Fathers Name, Mother's Name	(a) If the name has more than 30 digits, fill Annexure II for the same.(b) If the applicant is an Orphan, he/she may leave the fields blank. However, an official document to support the status to be submitted.
1	1	Politically Exposed Person	Politically Exposed Person's (PEPs) are individuals who are or have been entrusted with prominent public functions such as heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials
2	2	Proof of Identity	If the applicant is submitting Aadhaar as proof of Identity, the first 8 digits of the Aadhaar number should be redacted / masked on the submitted copy.
3	5	Bank Details	For UPS account opening through physical form (FORM A1) bank details and documentary proof are mandatory. Please submit a cancelled cheque / copy of bank passbook / bank statement / bank certificate / letter from Bank containing applicant's Name, Bank Name, Bank Account Number and IFS Code.
4	6	Selection of Pension Fund (PF) & Investment Choice	Government employee/subscribers can exercise choice of Pension Funds and allocate their investments either in Asset Class 'G' under 'Active Choice' or in Life Cycle Funds - LC 50 or LC 25 under 'Auto Choice'. If no choice is provided, the contributions will be distributed among the default Pension Funds and investment pattern selected by the Government.

			Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India: • Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.
_		FATCA & CRS Declaration /	• Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number).
5	7&8	Signature by Applicant	• In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided.
			• In case applicant is declaring US person status as 'Yes', provide PAN and 'father name' in addition to details required under section 9 of form.
			• In case the applicant is unable to affix signature, Left Thumb Impression in case of male and Right Thumb Impression in case of female should be affixed and in case there is no hands, toe impression of the applicant to be provided. The thumb / toe impression should be attested by two persons, one of whom should be the designated nodal officer attesting the same under his/her official seal and stamp.

General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and respective Nodal Office.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated respective nodal office where they submit the application.
- e) For more information / clarifications, contact CRA:

Website:

Call:

Address of CRA.

Annexures - Subscriber	r Registration Form for Government Sector applicants (Tick and fill applicable annexures below)
Annexure I - Print PF	RAN Card in Hindi (Fill the details in Devanagari script)
Applicant's First Name	
Middle Name	
Last Name	
Father / Mother's First	
Name	
Middle Name	
Last Name	
Annexure II - If Alph	abets of name exceeded the space provided on page 1 of the application form
Applicant's First Name	
Middle Name	
Last Name	
Father's First Name	
Middle Name	
Last Name	
Mother's First Name	
Middle Name	
Last Name	