

Life Insurance Corporation of India
Division _____, Branch _____

Application Form for Education Advance & Authorization for Recovery of Outstanding Advance from Dues Payable

Name of Agent : _____

Agency Code No: _____

Dev Officer/CLIA Code No: _____

Date of Appointment : _____

Present Club Membership & Year of Entry : _____

Amount of Advance required : _____
(As per Fee structure of Educational Institution)

Date of Payment : _____

Details of Advance :

Sr. No.	Name of child for whom advance required	Name, Address & Contact No of Educational Institution	Name of Course to be pursued	Details of last exam passed
1				
2				

List of Documents submitted:

Details of Payee for NEFT & PAN No :

Whether availed Education advance in past, if Yes, full details as below:

Sr. No.	Name of child for whom advance required	Name, Address & Contact No of Educational Institution	Amount of advance availed earlier	Date of advance availed
1				
2				

Details of living Child/Children :

Sr. No.	Name of Child	Age	Standard in which Studying

Present monthly recoveries from Commission for advances availed:-

Sr. No.	Name of Advance	Amount of Advance	Date of Advance	O/S Amount

I hereby declare that the Educational Institution stated above is recognized by UGC/AICTE/IMC/AIBMS/ICMR/Bar Council of India/Govt./_____ and/or the Course is approved by the _____ State / Central Govt. or DGC Aviation / Shipping. I also declare that the information given above is true and correct to the best of my knowledge and the advance applied for is not for the study course through Correspondence and/or Distance Learning. I am aware that if any information provided above is found to be false, I shall be liable for disciplinary action under Agents Regulations, 2017 as amended from time to time.

I am fully aware of the rules regarding Scheme of Advances to Agents and shall abide by the Rules and various provisions given in the scheme of Advances to Agents.

I undertake to execute all the necessary formalities required for releasing the advance and agree to repay the advance fully in the given repayment time period.

I authorize LIC of India to deduct the amount of outstanding advance and interest thereon from all moneys payable to me or my legal heirs, such as Renewal Commission, Hereditary Commission, Gratuity, Group Insurance (if any) etc., in case of my Termination / Resignation or Exit due to any other reason.

This authorization shall not be revoked by me until the advance sanctioned to me is completely wiped off by repayment.

Mobile No. of Agent:

Email ID of Agent :

(Signature of Agent)

Certified that the information provided by the Agent as above has been verified with the relevant records and found to be correct.

Date:

Place:

(Signature & Stamp of Branch In-Charge)