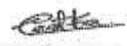


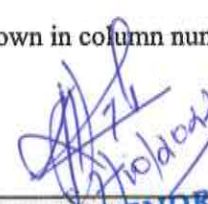
APPLICATION FOR ADMISSION TO THE WELFARE FUND PROFORMA

1. Name and address of the applicant
(in Block Letters) :CEATAMOL T.K.
THOTTEKATTU HOUSE (BEHIND ST
AUGUSTINE CHURCH, AROOR) AROOR P O
2. Date of enrolment of the applicant :15-05-2022
3. Name of the Bar Association of which applicant is a member :KERALA HIGH COURT
4. Date on which the applicant was admitted to the Bar Association. :
5. Approximate number of vakalaths filed, giving number of at least five cases spread over the whole period. :5 OP(DRT) 385/22, wp(C) 30906/22, wp(C) 35906/22, wp(C) 35378/22, wp(C) 32752/2022.
6. Reasons if any, for the delay in filing Application for membership to the welfare fund. :No
7. State whether the applicant has made any previous application for admission to the membership of the fund. If so, give the details regarding the same. :
8. State whether the applicant was employed or engaged in any profession, trade or calling till date. If so, give details regarding the period of service, eligibility and receipt of retirement benefits by the applicant from such employment or engagement. :NIL
- a. How many years of service do you have? :NIL
- b. Have you received any gratuity or PF? :False
- c. If yes, How much? :0
- d. How much pension are you receiving? :0
- e. Pension book details :
- f. Relieving order :
- I . . CEATAMOL T.K. . . do hereby declare that the particulars furnished are true and correct. (I further declare that I am not availing and I have not availed of any kind of retirement benefits from Government, public or private sector undertakings on account of employment before my enrolment as an advocate).


Signature of the Applicant.

Certified that the details shown in column number 5 (five) are correct as per court records.

(Seal)


(Signature of the Presiding Officer of the Court where the applicant practices)



P. DEVENDRAKUMAR
PEN : 601632
Registrar (Recruitment)
High Court of Kerala
Ernakulam



KERALA ADVOCATE WELFARE FUND

THE KERALA ADVOCATES' WELFARE FUND

Form-XI

[See Section 51 (IE) and Rule 4(IA)]*

Option Form to be submitted along with application for admission to the membership of the fund to claim previous actual practice

1. Name and address
(in Block Letters) : CEATAMOL T.K.
2. Address with pin code and Cell No : THOTTEKATTU HOUSE (BEHIND ST AUGUSTINE CHURCH, AROOR) AROOR P O , 688534 , 9961394027
3. Date of enrolment & Roll Number : 15-05-2022 , K/001030/2022
4. Number of Vakalaths filed till the date of filing of the application (approximate). : 5
5. Subscription payable corresponding to the period of actual practice. :
6. Number of completed years of practice from the date of enrolment till the date of filing application for admission with option form. : 7 years and 6 months
7. Subscription payable for getting prior practice reckoned (amount shown in column 5 multiplied by the multiplier shown in column 6) :
8. Fine payable @ Rs.2000/- for every completed years of actual practice as on date (i.e. Rs.2000 x multiplier) :
9. Grant total of amount paid under Section 15(1E) for getting prior period of practice reckoned and date of payment. (DD/receipt to be attached) :

DECLARATION

I, CEATAMOL T.K. .. do hereby declare that the particulars furnished above are true and correct and submit this option with the prescribed amount to get my prior period of actual practice reckon as provided in Section 15(1E) of the Act.



Signature of the applicant.

President

Secretary



KERALA ADVOCATE WELFARE FUND

Form No. III
See Section 15 and Rule 4 (1)

APPLICATION FOR ADMISSION TO THE WELFARE FUND

1. Name and address
(in Block Letters)

:CEATAMOL T.K.
THOTTEKATTU HOUSE (BEHIND ST
AUGUSTINE CHURCH, AROOR) AROOR P O

2. Age and date of birth of applicant

:26,27-05-1997

3. Date of enrolment under the Advocates' Act, 1961

:15-05-2022

4. Details of practice*1

:KERALA HIGH COURT

5. Number of Vakalaths filed for the last five years
(Approximately)

:5

6. Place or places of practice

:KERALA HIGH COURT

7. Suspension or discontinuance of practice if any,
with details of suspension and resumption.

:No

8. Name and address of the nominee or nominees
with the proportion of share to be paid to each.

: KUNJUMON T T
THOTTEKATTU HOUSE (BEHIND
AROOR CHURCH) AROOR P O 688534
%

9. Amount and date of payment to the Fund under
Section 15(3) (DD/counterfoil to be attached)

:500/-

10. Admission fee how paid

:

I ...CEATAMOL T.K. ... do hereby solemnly affirm that the particulars furnished above are true and correct..

Place:

Date:



Attested By

President

Secretary

Signature of the Applicant.

1*In case the applicant has practiced in more than one Court centre, certificate from the President or Secretary of each Bar Association has to be furnished.

K/1030/2022

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