

**NOMINATION OF NODAL OFFICERS FOR THE IMPLEMENTATION OF**  
**AEBAS**

**Details of the Employee to be assigned as the Nodal Officer**

Name :

PEN :

Department :

Office Name :

Designation :

Mobile Number :

Email ID :

Whether Aadhaar enabled/ Non- Aadhaar System : Aadhaar enabled  Non Aadhaar enabled

**Existing Nodal Officer Details**

Name :

PEN :

Name & Signature of the Head of the  
Department

Note : Please fill up the form counter sign with seal & send the scanned copy of the duly filled in form to [info@spark.gov.in](mailto:info@spark.gov.in) with copy marked to [gadcdn4@gmail.com](mailto:gadcdn4@gmail.com)