



# Complaint Form

މުޢާލިމުގެ ފޮޓޯ ފޯމް

މުޢާލިމުގެ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ދަންނަވާނެ ގޮތް ބަލާށެވެ.

ސަބަބު 8 (8 ވަނަ އަދަދު) ތަޢާރުކުރާ ގޮތް ބަލާށެވެ.

**Maldives Pension Administration Office**

City Square, Chaandhanee Magu, Male', Maldives

☎ 1441    ✉ info@pension.gov.mv    📱 /pensionoffice    🌐 www.pension.gov.mv

**Guardian's information** 4

މަތީ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާނެ ގޮތް ބަލާށެވެ.  
Fill this section if the applicant is Guardian

Name:

Passport / Immigration No. (Foreigners):

Date of Birth:  Day  Month  Year

Phone / Mobile number:

Email:

Address:

**Complaints** 5

މަތީ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާނެ ގޮތް ބަލާށެވެ.  
Please put a (✓) on the complaint you wish to submit.

Complaints from Employer

Problems encountered in enrolling employees in the Maldives Retirement Pension Scheme

Problems encountered in submitting monthly statement of pension contributions

Problems encountered in depositing monthly pension contributions (Payments)

Complaints about pension payment

Pension payments delayed / discontinued

Discrepancies in the pension amount as pension

Note: If you are submitting Complaints about pension payment, please submit a bank statement including details up to the date of submitting this form

**Form Submitted by** 1

މަތީ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާނެ ގޮތް ބަލާށެވެ.

Employer

Pensioner / Member of Maldives Retirement Pension Scheme / Employee

Guardian

**Employer's information** 2

މަތީ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާނެ ގޮތް ބަލާށެވެ.  
Fill this section only if you are an Employer

Employer's Name:

Employer ID:

Phone / Mobile number:

Email:

Address:

**Information of Pensioner / Employee / Maldives Retirement Pension Scheme Member** 3

މަތީ ފޮޓޯ ފޯމް ފުރިހަމަކުރުމަށް ފުރުޞަތު ހުޅުވާނެ ގޮތް ބަލާށެވެ.  
Fill this section only if you are Pensioner / Employee / Member of Maldives Retirement Pension Scheme / Guardian

Name:

Passport / Immigration No. (Foreigners):

Date of Birth:  Day  Month  Year

Phone / Mobile number:

Email:

Address:

