

**सवारी डिब्बा कारखाना/INTEGRAL COACH FACTORY, चेन्नै/CHENNAI-38**

(चिकित्सा पहचान-पत्र आवेदन - सेवारत कर्मचारियों के लिए)

**APPLICATION FOR MEDICAL IDENTITY CARD - SERVING EMPLOYEES**

1. नाम/NAME :
2. कर्मचारी संख्या/Emp.No. :
3. पदनाम/ Designation :
4. मूल वेतन/लेवल/ Basic Pay/Level :
5. कार्यालय/टिकट संख्या/ Office/ Tkt.No. :
6. घर का पता/ Residential Address :
7. नियुक्ति की तारीख/Date of Appointment :
8. सेवानिवृत्ति की तारीख/ Date of Retirement :
9. कर्मचारी की आयु/Age of Employee :
10. जन्म की तारीख/ Date of Birth :
11. रेलवे अस्पताल/ स्वास्थ्य इकाई जिसमें कर्मचारी  
अपना नाम पंजीकृत करना चाहते हैं /Rly. Hospital/  
Health Unit in which the employee wants to be  
registered :

**परिवार के सदस्यों का विवरण / DETAILS OF FAMILY MEMBERS**

क्रम सं./ Sl. No.	नाम/ Name	आयु/जन्म की तारीख Age & DOB	संबंध/ Relationship (Including Self)	पहचान चिन्ह Identification Mark

Whether Family is living separately at a different Station and if so:  
Their Residential Address :

Their Sl.No.in Para II above :

I Declare that the family members furnished in para II above are the same as furnished in the Declaration for Passes/PTO's

कर्मचारी के हस्ताक्षर  
Signature of Employee

पर्यवेक्षीय अधिकारी के हस्ताक्षर  
Signature of the Supervisory Official

दिनांक/Date:

नोट/Note:

If there is any change in the family composition after giving this declaration, the employee should advise the change to the supervisory official under whom he/she directly works as and when the changes takes place so that these changes can be effected in the Medical Identity and Index Card immediately.

- The Employee should enclose family Photo as per family declaration.