

**UNIVERSITY OF DELHI
FINANCE BRANCH
(GROUP INSURANCE SCHEME CELL)**

No. Fin./GIS Cell/2007/
Date : 12th September,2007

To

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Subject : - Option to opt out of the revised Group Insurance Scheme.

Dear Sir/Madam,

1. I am directed to invite attention to University's letter No. dated 18.7.2007 through which revised Group Insurance Scheme with enhanced risk cover and monthly premium was circulated. The Life Insurance Corporation of India has offered a one time option to existing members for opting out of the Scheme altogether. Employees opting out will not be permitted to rejoin subsequently. Those opting out will be paid back their accumulation in savings fund of the erstwhile Group Insurance Scheme.
2. Accordingly, an option form is appended herewith. The existing members may exercise their option not to join the revised Scheme and forward it through their Head of the Department/ Dean/ Principal/ Director to the undersigned latest by 21st September, 2007. Those who does not exercise their option or whose option does not reach the undersigned by the specified date shall be deemed to have opted for the revised Group Insurance Scheme.

Encl. Blank option Form

Yours faithfully,

Sd/-

Vir Singh
Assistant Registrar (Accounts)

**FORM OF OPTION FOR REVISED GROUP INSURANCE
SCHEME APPLICABLE TO TEACHING AND NON-TEACHING
EMPLOYEES OF UNIVERSITY OF DELHI.**

To

The Registrar
University of Delhi,
Delhi – 110007.

Sir,

I have read and understood the revised Group Insurance Scheme applicable to teaching and non-teaching employees of University of Delhi and its affiliated colleges circulated by the University of Delhi vide letter No. _____ dated _____. I hereby opt not to join the revised Group Insurance Scheme.

Place :

Yours faithfully,

Dated :

Signature

Name

Designation

Deptt./ College

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