

UNIVERSITY OF DELHI
(Group Insurance Scheme Cell)

Appendix – II

PROFORMA FOR EMPLOYEES REQUIRING CHANGE OF CATEGORY DUE TO PROMOTION/PLACEMENT IN THE HIGHER SCALE DURING THE PERIOD FROM OCTOBER, 2001 TO SEPTEMBER, 2002.

Name of the Institution _____

S.No.	Name of the employee	Father's/ Husband's Name	Date of Birth	Date of Joining the Scheme	Existing/PRESENT Desig- nation	Scale of pay	Cate- gory	Date of promotion/ placement in the present Scale of pay	<u>CHANGE FROM</u> Category S.No.	Desig- nation
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Employer's Certificate

Particulars of all the employees furnished above towards change of Category on account of promotion/placement in the higher scale have been verified and found to be correct. As such the necessary change of category may please be admitted as proposed, in the Appendix – II.

(Signature of the employer)

Date _____