OPTION FOR MEMBERSHIP OF DELHI GOVERNMENT RETIRED EMPOYEES HEALTH SCHEME

***I hereby ..... for the membership of Delhi Government Retired Employees Health Scheme w*.e.f.** for availing the medical facilities for which I shall deposit subscription of Rs. /- in lump sum (equal to 10 years of subscription @ Rs. /- per month according to Pay Matrix Level-) for the life time membership.

( )
Designation-

Countersigned By

DDO-DTU **Head of Office-DTU/DD(SB)-TTE**