

DON'T APPLY WHITNER. IF APPLIED, FORM WILL BE INVALID



**SOUTH CENTRAL & SOUTH COAST RAILWAY
EMPLOYEES' CO-OP. CREDIT SOCIETY LTD.**

SAHAKARA BHAVAN, HIMMATNAGAR, SECUNDERABAD - 500 003.

APPLICATION FOR SANCTION OF SPORTS AWARD

To,
The Secretary / CEO,
S.C. & S.Co.R. ECCS. LTD. (Welfare Fund)
South Central Railway, Secunderabad.

I, the undersigned share-holder request you to please sanction me achievement award from the above fund, as I am one falling under the categories mentioned in the objects of the Fund.

1. Name (in Block Letters)	:		
S/o. W/o. H/o.	:		
2. Designation	:	3. Department	
4. Office	:	5. Station	
6. Date of Birth	:	7. Date of Appointment	
8. Basic Pay	:		
9. P.F. No.	:	C.M.T.D. A/c. No.	
10. Home Address & Cell No.	:		
11. Name of the sports in which participated	:		
12. Year of Participation	:		
13. Achievement & event	:		

I declare that if the particulars furnished above are proved to be false at a late date, I am liable to be debarred from availing the benefits of the Society in addition to disciplinary action being taken by the Administration.

	Signature / LTI of the applicant
Place:	Attested by
Date:	Signature
	Designation with Office Seal

WITNESSES

1. Signature	2. Signature
(Name in block letters)	(Name in block letters)
Designation & Staff No.	Designation & Staff No.
Department	Department
Station	Station

I certify that the particulars mentioned by the applicant are to be best of my knowledge and deserve consideration.

Place:	Signature of the Controlling Officer
Date:	OFFICE SEAL

FOR SPORTS OFFICER USE ONLY
(To be filled by Railway Sports Officer for Railway Employees)

Signature of Sports Director
with Office Seal

FOR OFFICIAL USE OF THE SOCIETY ONLY

Name _____ Designation _____

Staff / Ticket No. _____ Department _____ Station _____

Whether a Shareholder _____ Sport / Event _____

Whether Recommended by Sports Officer _____

Whether any aid was sanctioned previously _____

Clerk (Welfare fund) _____ O.S. _____

Sanctioned Rs. _____ towards Award from the Welfare Fund Aid for Self/Team/Dependent.

I.A.	SECRETARY / CEO	MEMBER (Welfare Fund Committee)	CHAIRMAN (Welfare Fund Committee)
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FOR CHEQUE SECTION USE ONLY

Cheque No. _____ Date _____ For Rs. _____

_____ in favour of Sri / Smt. _____

being the Award from Welfare Fund.

DIRECTOR	SECRETARY / CEO
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Documents to be enclose (all xerox copies):

- 1) Sports Certificate
- 2) Bank particulars of the share holder with IFSC code and self attestation.
- 3) CCS pass book. (xerox copy)
- 4) Office ID Card or Medical Card (xerox copy)
- 5) Latest Pay Slip.
- Bank A/c. No.
- Branch
- IFSC Code