



पूर्व तट रेलवे
EAST COAST RAILWAY

प्रधान मुख्य कार्मिक अधिकारी का कार्यालय
Office of the Pr. Chief Personnel Officer
रेल सदन, द्वितीय तल, भुवनेश्वर - 17
Rail Sadan, 2nd Floor, Bhubaneswar-17

No.ECoR/HQ/Pers/Wel/24/2020

Dated: 12.05.2023

To
All PHODs/CHODs/HODs
CAO(Con)/ECoR/BBS
Chairman/RRB/BBS


Sub:- Grant of lump sum Medical Assistance from CSBF for incurable diseases for the financial year 2023-24.

Applications are invited in the enclosed format for grant of lump sum medical assistance under Head-8 of Central Staff Benefit Fund (Relief of Distress, Sickness etc for staff in GP up to 4600/-) for the financial year 2023-24 to Non-Gazetted Railway Employees & their dependents.

Application complete in all respect may be forwarded to Welfare Section of PCPO's office for sanction of necessary assistance. It is an open ended financial assistance, hence beneficiaries may apply at any time during the financial year.

It is requested to give wide publicity among all Non-Gazetted Railway Employees working in your department/office. Employee above GP 4600/- under MACP are also eligible.


Encl: As above.


(C.R. Murmu)

Asst. Personnel Officer (HQ)
for Principal Chief Personnel Officer

Copy for information & necessary action to:

1. Steno to PCPO for kind information of PCPO.
2. Steno to CPO (Admn) for kind information of CPO (Admn).
3. Sr. System Manager/ECoR/BBS- for uploading the notification in Welfare portal of the Personnel department in ECoR website.
4. APO (Con)/BBS
5. General Secretary- ECoRSC & ECoRSU, AISCSTREA, AIOCREA & ECoRRPFA.
6. All members of CSBF.
7. Notice Board.


(C.R. Murmu)

Asst. Personnel Officer (HQ)
for Principal Chief Personnel Officer

**APPLICATION FOR GRANT OF LUMP-SUM FINANCIAL ASSISTANCE FROM CSBF
FOR INCURABLE DISEASES FOR THE FINANCIAL YEAR 2023-2024**

Sl No	Nature of ailment	Put ✓ mark
1	Cancer	
2	Heart ailment	
	Stent placement (One time)	
	Bypass/Open Heart Surgery(One time)	
3	Kidney	
	Kidney Dialysis	
	Kidney Transplant (One time)	
4	Thalassemia	

1	Name of the applicant in full (In BLOCK LETTERS)	
2	Designation	
3	Department/Station/Division	
4	Pay Band & Grade Pay/Level	
5	Basic Pay	
6	PF No/NPS No	
7	Mobile Number	
8	Name of the patient	
9	Relationship with the employee	

I declare that the statement/bio-data given above are true to the best of my knowledge and belief. I shall be liable to disciplinary action, if any of them is found incorrect afterwards. I also declare that no claim has been made from any other sources for which the above claim has been submitted herewith.

Date

Signature of the applicant

Recommendation of Railway Medical Officer

Signature of Railway Medical
Officer

(Seal)

Forwarded to Central Staff Benefit Fund Committee. Except the statement regarding sickness, I have checked the information in other respects and found correct.

R. Kumar
12/05/23

Signature of the controlling officer

(Seal)