

राष्ट्रीय इस्पात निगम लिमिटेड  
विशाखपट्टणम इस्पात संयंत्र  
विशाखपट्टणम - 530 031

Rashtriya Ispat Nigam Limited  
Visakhapatnam Steel Plant  
Visakhapatnam-530 031

APPLICATION FOR MEDICAL RECORD-CUM- IDENTITY BOOK

TO  
The Incharge  
Welfare Section  
Personal Department  
Main Administration Building  
Visakhapatnam Steel Plant

Add  
Photograph  
here

SIR,

Please issue me a medical record-cum identity book as per the details given below:

1. Name Of Patient:
2. Sex:
3. Date Of Birth/Age:
4. Identification Marks: a)  
b)
5. Relationship
6. Blood Group
7. Address
8. Name Of The Ex-Employee
9. Employee Number
10. Designation
11. Department/ Section

(Signature of the Applicant)

12. DATE OF EMPLOYEE'S RETIREMENT

13. Whether previous medical book surrendered

The above Particulars are verified from the retired employee and found to be correct.

Date

(Signature of zonal personnel  
Executive with seal)

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(To be filled in by the Welfare Section of Personnel Department)

14. Book No:

15. Registration NO:

16. Date of Issue :

(Signature of issuing Officer)

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Note: Applicant should enclose one recent pass port size photograph along with this

application and another to be affixed on the place provided on the application for certification by the ZPE.

