

COMPLIMENTARY PASSES FOR WIDOWS OF RAILWAY EMPLOYEES

(FIRST APPLICATION FORM)

1. Name of the applicant :
(in block letters)
 2. Name of the employee :
(deceased)
 3. Designation of the employee :
(deceased)
 4. Name of the office (where the employee :
was working prior to demise)
 5. Date of demise of the employee :
 6. Details of dependent children :
- | <u>Sl. No.</u> | <u>Name</u> | <u>Age(as on date)</u> | <u>Relationship</u> |
|----------------|-------------|------------------------|---------------------|
| (a) | | | |
| (b) | | | |
| (c) | | | |
| (d) | | | |
7. Class of pass admissible :
 8. Present address :

Signature/Left Thumb Impression
of the widow

C E R T I F I C A T E

Certified that the information given above is correct to the best of my knowledge and belief.

Signature of the		Signature of the	
Railway employee :		Railway employee :	
Designation :		Designation :	
Office :		Office :	

- NOTE : (i) An attested Xerox copy of the Family Pension Payment Order or Death Certificate should be furnished along with this application.
- (ii) Two copies each of Passport size Photographs of the widow and dependent children(duly attested) for whom the pass is applied for, should also be enclosed.
- (iii) An attested Xerox copy of the Certificate issued by the Railway Administration should be enclosed.
- (iv) Identity Card should be produced, if already in possession.
