

**DELHI LEGISLATIVE ASSEMBLY SECRETARIAT: OLD SECRETARIAT: DELHI.**

**Application for issue for medical card under DGEH Scheme for MLA/Ex-MLA/Ex-MMC/**

**Family pensioner:**

Small-size group  
photograph of the  
Member/Ex-  
Member with the  
dependent family  
members.

1. Name : \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Father's name: \_\_\_\_\_
4. Date of birth: \_\_\_\_\_
5. Period(s) of Membership: \_\_\_\_\_
6. Constituency: \_\_\_\_\_
7. Contact No.: \_\_\_\_\_
8. Govt. Dispensary opted: \_\_\_\_\_

<u>Sl.</u> <u>No.</u>	<u>Name of dependent* family member</u>	<u>Date of Birth</u>	<u>Relation</u>

\* A member of the family is treated as dependent only if his/her (except spouse) income from all sources is less than Rs.9000/-+D.R. (as per CS(MA) Rules) per month.

Note: Please attach one extra copy of the photograph.

“I hereby undertake that I will intimate the change in dependency status of the above mentioned dependents as and when necessary.”

Place: Delhi

(Signature of MLA/ Ex-MLA/MMC

Dated:

Family pensioner)