## SOUTHERN RAILWAY

No.U/P.641/Deve.Occup.Skill/CSBF 16-17.

Divisional Office, Personnel Branch, Madurai,07.11.2016.

All Supervisors/MDU Dn.

Sub:- Grant of Financial Assistance under CSBF 2016-17 for Developing Occupational Skills of Physically / Mentally Challenged Railway Employees / Wards.

Ref:- CPO/MAS letter No.P(W)641/1/7/TDOS/CSBF dt. 25.10.2016.

It has been decided to grant Financial Assistance from CSBF 2016-17 towards Developing Occupational Skills of Physically / Mentally Challenged Railway employees / Wards .

Applications are called for from all Non-Gazetted Railway Employees for availing assistance under the above Head.

- Applications are called for from Physically / Mentally challenged Railway Employees / Wards in the formats prescribed as Annexure - A and Annexure - B respectively.
- 2. Applications will be considered for the expenditure incurred during the preceding financial year i.e. 2015-16 only.
- Applicants should produce documentary proof of disability from authorized medical authorities viz. Railway Medical authorities State Government or any other Recognized Medical Board.
- Expenses incurred for Railway Employees / wards for Developing Occupational Skills will be considered only on production of proper documentary proof.
- 5. For claiming assistance for undergoing any other specialized therapy proper documentary proof should be submitted.
- 6. Assistance under this scheme for wards is extended towards expenditure for care giving i.e. Caretaker allowance (Only for wards with 40% disability and above).
- Assistance towards transportation costs per child for both mentally and physically challenged wards will be decided only on submission of proper proof.
- 8. Expenditure incurred towards school fees over and above Rs.36,000/- alone (for the current year only) will be considered by the committee on case to case basis. (Up to Rs.36,000/-, school fees can be claimed under Children Education Allowance.)
- Assistance will be given to employees / wards in need of special equipment (Only for those
  with 40% disability and above) on submission of original bills and relevant medical advice /
  requirement. Grant of funds will be as decided by the committee.
- 10. Expenses towards medicines, medical tests and Doctors Consultation fees etc. will not be taken into consideration for assistance under this scheme.

It is reiterated that, separate application formats are prescribed for (i) Physically / Mentally challenged Railway employees and (ii) Physically / Mentally challenged wards.

Applications are also invited from employees of Divisional Office / Division Controlled Offices who are covered by DSBF.

The last date for receipt of applications in Divisional Office, Personnel Branch is 07.12.2016. Applications received after this date will not be entertained for grant of funds.

Contd....2

The applications should be correctly filled by the employees in all respects and forwarded by the concerned supervisors in time.

Any spurious claim preferred by the employees and noticed at a later date will be viewed seriously duly invoking D & A Rules.

WIDE PUBLICITY MAY PLEASE BE GIVEN TO ALL EMPLOYEES DULY PASTNG A COPY IN THE NOTICE BOARD.

ENCL: Annexure -A & B.

Asst.Personnel Officer/M&E/MDU.
For Divl.Personnel Officer/Madurai.

Copy to PS to DRM for kind infn. of DRM
PS to ADRM for kind infn. of ADRM.
All Branch Officers/MDU Divn.
All CS & WIs, S&WIs/Per.Br.
All CHOS & All Supervisors.
Divi.Secretary/SRMU/MDU, Divi.Secy./AISC & AT REA, AI OBC REA/MDU.
NOTICE BOARD & COMPUTER SECTION.

## CENTRAL STAFF BENEFIT FUND

## APPLICATION FOR FINANCIAL ASSISTANCE TOWARDS DEVELOPING OCCUPATIONAL SKILLS OF PHYSICALLY / MENTALLY CHALLENGED RAILWAY EMPLOYEES

1:	Name of applicant (S/Shri/Smt/Kum)							
2.	P.F. No. / Staff No.							
3.	Designation/Office/Station							
4.	Bill Unit No.							
5.	Pay in Pay Band & Grade Pay		Pay Band Rs.		Pay Rs.	Grade Pay Rs.		
6.	Telephone No.		Railway		DOT	Mobile		
7.	Whether the employee belongs to SC/ST/OBC/UR/PH (Tick (√) relevation)	ant	SC	ST	OBC	UR	PH	
8.	Nature/extent of disability (Mention	%)	Nature		Extent %			
9.	Whether special equipmen like wheel chair, other aides, special oftware, etc are required.		Yes		No			
10.	Cost of equipment	Rs.						
11.	Whether original bills are submitted	Date	No. of Bills Date of Bills Amount Rs.					
12.	Any other reason for claim							
13.	Total amount claimed	Rs.						

Signature of the employee: Designation / Station: Date:

## CERTIFICATE BY DEPARTMENT

The particulars furnished above have been checked and found correct. Original bills have been verified.

Forwarded to the Chairman / CSBF Committee, Headquarters Office, Chennai – 600 003 for consideration.

Office Seal:

Signature & Designation of the Controlling Officer:
Date:

K.S.3