



राष्ट्रीय गतिशील दिव्यांगजन संस्थान
National Institute for Locomotor Disabilities (Divyangjan)

(दिव्यांगजन सशक्तिकरण विभाग, सामाजिक न्याय एवं अधिकारिता मंत्रालय, भारत सरकार)
(Department of Empowerment of PwDs (Divyangjan), Ministry of Social Justice and Empowerment, Govt. of India)
बी.टी. रोड बनहुगली, कोलकाता-700090 / B.T. Road, Bon-Hooghly, Kolkata-700090
Phone: 2531-0279, 2531-0610/Tele Fax: 2531-8379/E-mail: mail@nioh.in /web: www.niohkol.nic.in




No: Misc-Order/DDA/2015/NIOH/2270(6)

Date: 12-03-2024

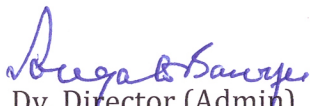
CIRCULAR

As per the instruction of the Competent Authority of the Institute, the Identity cards of all Retired employees of this Institute will be issued. In this regard all Retired employees of NILD Kolkata are requested to submit the necessary details alongwith self attested phtocopy of Pension Payment Order/Retirement Order to the Estate Officer, NILD in prescribed pro-forma (enclosed) along with two recent Passport size photographs within 30 days from the date of issuance of this circular. The expenditure of providing laminated Identity card will have to be borne by the concerned Retired employee as per actual, to be deposited in the Accounts Section.


(S. Banerjee)
Dy. Director (Admin)

Copy forwarded for information and necessary action to:

1. Accounts Officer, NILD Kolkata
2. In- Charge IT, NILD Kolkata for uploading in the Institute Website.
3. Estate Officer, NILD, Kolkata.
4. PA to Director, NILD, Kolkata
5. Establishment, NILD Kolkata
6. Notice Board/Guard file.


Dy. Director (Admin)



APPLICATION FORM FOR IDENTITY CARD – RETIRED EMPLOYEE

(TO BE FILLED IN BLOCK LETTERS ONLY)

1.	NAME		Affix Passport photograph with blue back ground size 4.5 x 3.5 cm
2.	DATE OF BIRTH		
3.	DATE OF SUPERANNUATION		
4.	POST HELD ON RETIREMENT		
5.	P.P.O. NUMBER AND DATED / RETIREMENT ORDER (For CPF)		
6.	IDENTIFICATION MARKS		
7.	BLOOD GROUP		
8.	MOBILE NO		
9.	EMAIL ID		
10.	ADDRESS PIN	

Declaration:

I hereby solemnly declare that all the statements made in the application are true, complete and correct to the best of my knowledge and belief.

Dated:

Signature of the individual