

**SOUTHERN RAILWAY**  
**Application for Financial Assistance Towards Training for**  
**Developing Occupational Skills of Physically / Mentally Challenged**  
**Railway Employees**

ANNEXURE-'A'

1.	Name of applicant (S/Shri./Smt./Ms.)	:				
2.	IPAS Number (PF No.)	:				
3.	HRMS ID	:				
4.	Date of Birth:	:	4.a.:Date of Appointment:-			
5.	Bill Unit No. & Bill Preparing Office	:				
6.	Designation/Office/Station/Department	:				
7.	Pay Level in VII PC Pay Matrix	:				
8.	Telephone No.	:	Railway		Mobile	
9.	Community	:	SC	ST	OBC	UR
10.	Nature & Extent of disability (Mention %)	:	Nature		Extent %	
11.	Whether special equipment like wheel chair, other aides etc. are procured	:	YES		NO	
11.a	If Yes-Type of equipment procured	:				
11.b	Cost of equipment	:	Rs.			
12.	Enclose the Disability certificate issued after 01.04.2019 & Bills (Pertaining to year 2023-2024 – Period from 01.04.2023 to 31.03.2024 only.	:	Disability certificate		Enclosed	
		:	Number of Bills			
		:	Date of Bills			
		:	Amount			
13.	Total amount claimed	:	Rs.			

Date:

Signature of the employee:  
Designation / Station:

Forwarded by Controlling Officer:

**CERTIFICATE BY PERSONNEL DEPARTMENT**

The particulars furnished above have been checked and found correct. Original bills have been verified. The employee drawing salary in Bill Unit No:.....

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

Office Seal:

Signature & Designation  
of the Personnel Officer:

Date

**\*\*Application should be enclosed along with other documents such as Disability Certificate, Bills etc.**

.....  
Forwarded by controlling officer

Signature & Designation of the  
Controlling Officer:

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**CERTIFICATE BY PERSONNEL DEPARTMENT**

The particulars furnished above have been checked and found correct. Original bills have been verified and submitted by the employee. The employee draws salary Bill unit No.....

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

Office Seal:

Signature of the Personnel Officer

Date:

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**\*\*\*\* For obtaining the certification by the Personnel Department, application along with all the original documents should be enclosed by the employee and all the original Bills have to be submitted at respective bills drawing office for scrutiny and forwarding by personnel officer communicate to Hqrs.**

**(Please ensure that all the particulars called for is filled)**