

SAHA INSTITUTE OF NUCLEAR PHYSICS

Sector-1, Block-AF, Bidhannagar, Kolkata-700 064.

Application for grant of Special Increment in the form
of personal pay under the "Family Planning Allowance"

Please cross thus ☐ in the applicable box

Part I : To be completed by the applicant

A. Details of employee (applicant) :

Name	Designation	Divn./Section	Identity No.

Basic Pay	Pay scale	Amount of next increment
Rs.	Rs.	Rs.

B. Details of family :

Person	Date of birth	Date of Sterilisation if applicable	Name & address of Hospital/Institution	No. of living children
Self				
Spouse				

C. Full name of the spouse : _____ (IN BLOCK LETTERS)

1. I/My spouse have/has undergone Vasectomy/Tubectomy operation at _____ on.....

Necessary sterilization certificate issued by..... is enclosed. In case I/my spouse have to take resort to recanalization for any reason whatsoever I undertake to report this fact forthwith to the Government. I also undertake to report to the Government if there is failure of sterilization operation.

2. I certify that :

- 2.1.1. ☐ my spouse is not a government servant.

OR

- 2.1.2. ☐ my spouse is a government servant but has not claimed the special increment from the concerned government department consequent on either of us undergoing sterilization. Original certificate issued by the employee is enclosed herewith.

- *2.2. ☐ My wife is not pregnant on this date.

- 2.3 The particulars furnished above are correct.

Date : _____

(Signature)

* Applicable where the male government servant has himself undergone the sterilization operation.

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No.

Date :

STERILISATION CERTIFICATE

Details of the employee :

Name	Designation	Divn./Section	Identity No.

Details of the patient (employee or employee's spouse)

Name	Relationship with the employee	Signature

1. I, Dr. _____ hereby certify that I have conducted Vasectomy/Tubectomy operation on Shri/Smt. _____ husband/wife of Shri/Smt. _____ employed as _____ in _____ at _____ on _____

1.1. A sperm count was undertaken on _____ and on the basis thereof it is certified that the Vasectomy operation has been completely successful. (In the case of Vasectomy operation only)

* 2. the Sterilisation is not on account of Hysterectomy.

1.3. in my opinion, the employee fulfils the conditions prescribed in the Ministry of Finance O. M. No.7 (39) – E.III/79 dated 4th December, 1979 as amended from time to time for special increment.

- Please strike off if not applicable.

Signature : _____

Name : _____

Regn. No. : _____