UNIVERSITY OF DELHI  
(Group Insurance Scheme Cell) 

Appendix – II 

PROFORMA FOR EMPLOYEES REQUIRING CHANGE OF CATEGORY DUE TO PROMOTION/PLACEMENT IN THE HIGHER SCALE DURING THE PERIOD FROM OCTOBER, 2001 TO SEPTEMBER, 2002. 

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Name of the employee</th>
<th>Father’s/ Husband’s Name</th>
<th>Date of Birth</th>
<th>Date of Joining the Scheme</th>
<th>Existing/PRESENT Designation</th>
<th>Scale of pay</th>
<th>Category</th>
<th>Date of promotion/placement in the present Scale of pay</th>
<th>CHANGE FROM Category</th>
<th>S.No.</th>
<th>Designation</th>
</tr>
</thead>
</table>

Name of the Institution ________________________________________________________________
Employer’s Certificate

Particulars of all the employees furnished above towards change of Category on account of promotion/placement in the higher scale have been verified and found to be correct. As such the necessary change of category may please be admitted as proposed, in the Appendix – II.

(Signature of the employer)

Date _________________