

66

HARYANA CIVIL SECRETARIAT



Photo

PROFORMA FOR ISSUANCE OF ICARD FOR PENSIONERS

NAME

FATHER'S NAME

SEX [M/F]

LAST POST HELD

DATE OF BIRTH

BLOOD GROUP

LAST BASIC PAY

DATE OF RETIREMENT

RESIDENCE ADDRESS

TELEPHONE No. (Res.)

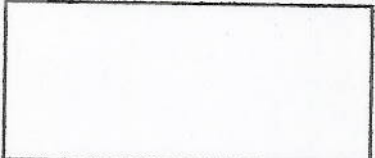
MOBILE No.

EMAIL

DEPENDENT DETAILS
(for HARYANA GOVT.
ONLY)

S.No.	Name	Age	Relation
1.			
2.			
3.			
4.			
5.			
6.			

Date:



Signature of Applicant

FOR OFFICE USE ONLY

ICARD NO.

DATE OF ISSUE

[ISSUING AUTHORITY]
Signature with Seal