



**Rajiv Gandhi Institute of Petroleum Technology  
Rae Bareilly**

**MEDICAL REIMBURSEMENT CLAIM FORM**

कर्मचारियों एवं उनके परिवारों के चिकित्सा और/अथवा उपचार पर हुए व्यय की वापसी की मांग का आवेदन प्रपत्र

(N.B.: Separate form should be used for each patient)

1. Name of Employee (In Block Letter): \_\_\_\_\_
2. Employee Code No.: \_\_\_\_\_
3. Basic pay + Grade Pay (₹) \_\_\_\_\_
4. Designation: \_\_\_\_\_
5. Deptt./Centre/Section/Unit/Cell: \_\_\_\_\_
6. Name of Patient: \_\_\_\_\_
7. Relationship with Employee: \_\_\_\_\_
8. Age: \_\_\_\_\_
9. Place at which the patient fell ill: \_\_\_\_\_
10. Nature of Illness & its duration: \_\_\_\_\_
11. Name & Designation of treating Doctor/Hospital: \_\_\_\_\_
12. Summary of claim (Attach Prescription, Bills etc. in original)

Particulars		Prescriptions / Bills / Receipts & Dated	Amount Claimed (₹)	Amount Allowed (₹)	Remarks / Reason
1. Consultation:	a) b)				
2. Diagnostics / Tests:	a) b)				
3. Medicines / Vaccination (As per column 5)	a) b)				
4. Others:	a) Room Rent b) Operation / Procedure Chgs. etc. c) ICU/ CCU d) Other (specify)				
<b>TOTAL →</b>					
(In words) →					

5. Name of Medicines / Vaccination (In Block Letter)

Sl.No.	Name of Medicines	Quantity	Amount (₹)
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			
11)			
12)			
13)			
14)			
15)			

a) Cost of Medicines Cash Memo (s) \_\_\_\_\_

6. List of Enclosures:
- 1) \_\_\_\_\_
  - 2) \_\_\_\_\_
  - 3) \_\_\_\_\_
  - 4) \_\_\_\_\_
  - 5) \_\_\_\_\_

**Declaration to be signed by the Employee of the Institute:**

- i) I, hereby declare that the statements given in application are true to the best of my knowledge and belief and that the person for whom medical expenses are incurred in wholly dependent on me.
- ii) Certified that my parents are not earning member. They are wholly dependent upon me and residing with me.

(Signature of Employee)

Date: \_\_\_\_\_ Dealing Assistant \_\_\_\_\_ Verified by Institute's Doctor \_\_\_\_\_ Sanctioning Authority \_\_\_\_\_

**Note:** All the medical claims should be submitted within three months.