

### 6.3.1 The institution has effective welfare measures for teaching and non- teaching staff

#### INDEX

Sr. No	Welfare Measures
1	Medical Insurance
2	Accidental Insurance
3	Financial Assistance to Conference and Workshops
4	Uniforms to all Staff
5	Communication expenses
6	Mobile & diesel Allowance for Senior Staff
7	Immediate availability of Personal Loans by the Co-operative Bank managed by the Management



## Bajaj Allianz General Insurance Company Ltd.

Bajaj Allianz House, Airport Road, Yerwada, Pune -411006

### Mediclaime Insurance - POLICY SCHEDULE

BAJHLIP21536V022021

#### Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc

301-302, Bhoomi Sarraswathi,, A-wing, Bldg No- 2,, Ganjawala Lane, Borivali, West, Mumbai-400092 PHONE NO 022-67317777

Policy Number OG-23-1911-8402-00000036 Product Group Mediclaime (Standard)

First Policy No OG-22-1911-8402-00000044 Inception Date 29-OCT-2022

Application No Scrutiny No 327132467

GSTIN / UIN 27AAATT3071G1ZJ Place of Supply/ State Code/ Name 27 - Maharashtra

Policy Issued On 28-Oct-2022

Company GST No.: 27AABCB5730G1ZX Invoice No.: 364351278/1

Company PAN: AABCB5730G

Period Of Insurance From 00 29-Oct-2022 TO 28-Oct-2023 Midnight

Insured Name Shirpur Education Society R C Patel Educational Trust Co Rcpiper Rcpit Hrpiper Hrp Mahila Rcp Sr College Rcp Bed Ded Rcpp  
Imrd

Insured Address C/O R C Patel Inst Of Technology, H R Patel Inst Of Pharmaceutical Education And Research, , Po Area - Shirpur,

Loan Account No: NA

, Dhule, Maharashtra - 425405

Description	Sum Insured (Rs.)
Total 855 = Self 855 + 0 Dependents	17,10,00,000.00

Base Premium 26,19,341.00

#### Special Discount

Net Premium 26,19,341.00

Terrorism 0.00

Stamp Duty 0.00

State GST (9%) 2,35,741.00

Central GST (9%) 2,35,741.00

Final Premium 30,90,823.00

\*\*\* All Premium figures are in Rupee

On specific request and subject to terms and conditions, record of information exchange will be made available.

#### HAT Reference Number:

Scope Of Cover As Per The Policy wording attached

Risk Covered Total 855 = Self 855 + 0 Dependents

Special Perils As per attached Group Mediclaime Policy Wordings and Benefit Chart

Special Exclusion As per attached Group Mediclaime Policy Wordings and Benefit Chart

Subject To Clauses As per attached Group Mediclaime Policy Wordings and Benefit Chart

Warrenties As per attached Group Mediclaime Policy Wordings and Benefit Chart

Special Conditions As per attached Group Mediclaime Policy Wordings and Benefit Chart

#### Comments

#### Premium Collection Details:-[Receipt No/Collection No/Amount]

1911-00424627 / 327132467 / RS. 173520 , 1911-00424654 / 327132467 / RS. 43380 , 1911-00424703 / 327132467 / RS. 216900 , 1911-00424793 / 327132467 / RS. 1044735 , 1911-00001955-E / 327132467 / RS. 1162 , 1911-00424629 / 327132467 / RS. 57840 , 1911-00424626 / 327132467 / RS. 184365 , 1911-00424691 / 327132467 / RS. 480795 , 1911-00424628 / 327132467 / RS. 72300 , 1911-00424630 / 327132467 / RS. 54225 ,



1911-00424641 / 327132467 / RS. 224130 , 1911-00424927 / 327132467 / RS. 53061 , 1911-00424625 / 327132467 / RS. 469950 , 1911-00424700 / 327132467 / RS. 14460 ,

<b>Agency Code BAG10015138</b>	<b>Channel Name : ML</b>
<b>Agency Name : JYOTI K BAROT</b>	
<b>Contact No : 7666374401/0</b>	
<b>Email - kamalbarot2003@yahoo.com</b>	

**Principal Location : Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.**

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.

Authorized Signatory  
Printed , Signed and Executed at Pune



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH002405964202122M Defaced No. 0001482221202122 dated 05-JUL-21 timing 12:58:03 of General Stamp Office, Mumbai, India.

Generated by vishal jadhav06

## Bajaj Allianz General Insurance Company Ltd.

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Regt. No.113)

Regd Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006(India)

### HOSPITALS NOT ELIGIBLE FOR CASHLESS OR REIMBURSEMENT CLAIMS

Policy Number OG-23-1911-8402-00000036

Hospital name	City	Address Line	PinCode
AQUA LIFE CARE HOSPITAL - Navi Mumbai	MUMBAI	SHREE DURGA APT OFFICE 2 1ST FLR A WING PLOT NO-186 SEC 10 OPP JUIN-AGAR RLY STATION NR D MART MALL SANPADA (e) NAVI MUMABAI 400705 - MUMBAI - MAHARASHTRA	400705
EDEN NURSING HOME	BONGAON	Near Gobardanga Hindu College Tinamtala Machalandapur - BONGAON - WEST BENGAL	743235
ADITYA HOSPITAL-INDORE,GOYAL NAGAR.	INDORE	1/5 GOYAL NAGARBANGALI CHOURA-HAINDORE. - INDORE - MADHYA PRADESH	452016
KSDR HOSPITAL	BANGALORE	MAGADI MAIN ROAD BYADARHALLI - BANGALORE - KARNATAKA	560091
SRI ANUGRAHA HOSPITAL	BANGALORE	MAHADESHWAR NAGAR MAGADI MAIN ROAD MARUTHI NAGAR - BANGALORE - KARNATAKA	560091
Millenium Hospital - Navi Mumbai	NAVI MUMBAI	Plot no 19 Sector 40 Palm Beach Road Navi Mumbai Seawood (W) Nerul - NAVI MUMBAI - MAHARASHTRA	400001
Greater Malwa Hospital	INDORE	5 Prime City Sukhliya Main Road INDORE - INDORE - MADHYA PRADESH	452005
AASHIRWAD NURSING HOME & DIABETES CENTER - New Delhi	NEW DELHI - OTHERS	A29/3 Lions Enclave Marble Block Opp DDA Park Vikas Nagar Uttam Nagar - NEW DELHI - OTHERS - DELHI	110 059
VENUS HOSPITAL-HYDERABAD	HYDERABAD	D.NO.16-2-661/EFJH JUDGES COLONY MALAKPET HYDERABAD. - HYDERABAD - ANDHRA PRADESH	500036
MEDIMAX HOSPITAL ( A UNIT OF SARAS HEALTH CARE PVT. LTD) -Ghaziabad	GHAZIABAD	Pratap Vihar 12-PRATAP VIHAR K - 112 Sec - 12 Behind Santosh Medical - GHAZIABAD - UTTAR PRADESH	201 009
KRISHNA HOSPITAL-Delhi	DELHI	J-21 Main Road 4th Pusta Kartar Nagar. - DELHI - DELHI	110053
Kausthubh Nursing Home	MUMBAI - NAVI MUMBAI	Plot No 76 Sector 6 Behind Ganesh Market And Post Office Koperkhairane - - MUMBAI - NAVI MUMBAI - MAHARASHTRA	410210
Krishna Hospital - Vadodara	VADODARA	New Vip Road Opp. Vaikunth Bunglows - - VADODARA - GUJARAT	390022
GOPAL HOSPITAL - Ghaziabad	GHAZIABAD	Shanti Nagar Bus Stand Loni - - GHAZIABAD - UTTAR PRADESH	201102
Mehta Hospital	AHMEDABAD	57 Brahmin Mitra Mandal Society Ellisbridge - - AHMEDABAD - GUJARAT	380006
ANAND HOSPITAL - Vikas Puri, New Delhi	NEW DELHI - OTHERS	B - 52 New Krishna Park Dholi Piao Vikas Puri - - NEW DELHI - OTHERS - DELHI	110018
Govind Prabha Hospital - Surat	SURAT	Opp Ratnasagar School Kazis Maidan Gopipura - - SURAT - GUJARAT	395001
SHREE SAI BABA HOSPITAL	NASIK	vavives sinnar-shirdi highway sinnar ph 02551-224777 - NASIK - MAHARASHTRA	422022
SRI DEEPA HOSPITAL-BANGALORE	BANGALORE	5TH BLOCK VISHWESHVARIAH NAGAR NEAR UJLAL UPANAGAR BANGALORE-560056 - BANGALORE - KARNATAKA	560056
Kabeer Hospital Pvt.Ltd.	KANPUR	Yashoda Nagar (Near Bajrang Chauraha) Kanpur Nagar-208029. Phone - 0512 2620051 3243685; E-mail: hos pitalsofka-beer@gmailcomkabeerhospitalpvtltdkanpurg mail.com - KANPUR - UTTAR PRADESH	208011

### IMPORTANT

- 1.The above hospitals are not a part of the Bajaj Allianz General Insurance Network.
- 2.Cashless facility is not valid at any of the above hospitals.
- 3.Reimbursement of claims for treatment taken at these hospitals will not be accepted for reimbursement
- 4.The above hospital list can be modified without any prior notice. Kindly check with our Call Centre at or 1800 102 5858 (Bharti) or 020 - 30305858 (Others)

**R.C.Patel Educational Trust's**  
**Institute of Management Research & Development, Shirpur**  
**EMPLOYEE INFORMATION SHEET FOR ACCIDENTAL INSURANCE**

Post Office (TATA AIG)

Date:- 15/09/2023



1	Employee count Above 15000/-	64	12,736.00
2	Employee count Belowe 15000/-	8	3,192.00
	Total	72	15,928.00

Sr. No.	Name of Employee	Post Name / Designation	Institute Ciontribution
1	Dr.Patil Vaishali Bhagwat	Director	199.00
2	Mr.Behere Manoj Narhar	HOD MCA	199.00
3	Dr.Patel Manoj Brijlal	IQAC coordinator	199.00
4	Dr.Patel Tushar Ramesh	HOD UG	199.00
5	Mr.Apye Kedar Shyam	Asst. Professor	199.00
6	Dr.Patil Amit Prakashrao	Asst. Professor	199.00
7	Mr.Pawar Vishal Arun	Asst. Professor	199.00
8	Mrs.Jade Archana Manoj	T & Placement Officer	199.00
9	Mrs.Songire Vijeta Bapu	Asst.Professor	199.00
10	Mrs.Patil Dhanashree Gajendrasing	Asst. Professor	199.00
11	Miss.Behere Kirtika Narhar	Asst. Professor	199.00
12	Dr.Sonawane Manojkumar Sahebrao	Asst. Professor	199.00
13	Ms.Patil Chhaya Suhas	Asst. Professor	199.00
14	Ms.Patil Rohini Rangrao	Asst. Professor	199.00
15	Ms.Saindane Priyanka Sanjay	Asst. Professor	199.00
16	Mr.Badgujar Rahul Sanjay	Asst. Professor	199.00
17	Ms.Nhalde Dipali Ravindra	Asst. Professor	199.00
18	Mr.Bhavsar Mahesh Kishor	Asst.Professor	199.00
19	Mr.Borase Dinesh Atmaram	Asst.Professor	199.00
20	Mr.Garge Vijay Ramesh	Asst.Professor	199.00
21	Mr.Gaur Amarsingh Kuwarsingh	Asst.Professor	199.00
22	Mr.Marathe Dagadu Mitharam	Asst.Professor	199.00
23	Mr.Bagwan Sufiyan Mustak	Asst.Professor	199.00
24	Mr.Patil Milind Ashok	Asst.Professor	199.00
25	Mr.Patil Vitthal Maharu	Asst.Professor	199.00
26	Mr.Sagale Sumit Shivaji	Asst.Professor	199.00
27	Mr.Sawant Kaustubha Kishorkumar	Asst.Professor	199.00
28	Mr.Sharma Laxmikant Mithulal	Asst.Professor	199.00
29	Mr.Shethiya Yogesh Chhabildas	Asst.Professor	199.00
30	Mr.Surana Sachin Subhashchand	Asst.Professor	199.00
31	Mrs.Agrawal Rupali Pawan	Asst.Professor	199.00
32	Mrs.Bhandari Priyanka Vinay	Asst.Professor	199.00
33	Mrs.Kirange Monali Sunil	Asst.Professor	199.00
34	Mrs.Gorle Vaishali Ashish	Registrar	199.00
35	Mr.Chaudhari Dilip Uddhav	Sr.Clerk	199.00
36	Mrs.Patil Kavita Gulabrao	Librarian	199.00
37	Mrs.Patil Nilima Balu	Asst. Librarian	199.00
38	Mrs.Endait Madhuri Manish	Account Officer	199.00
39	Mrs.Astha Wadhawani	Account Officer	199.00
40	Mr.Patel Hiral Suresbhai	Accountant	199.00

**R.C.Patel Educational Trust's**  
**Institute of Management Research & Development, Shirpur**  
**EMPLOYEE INFORMATION SHEET FOR ACCIDENTAL INSURANCE**



**Post Office (TATA AIG)**

Date:- 15/09/2023

41	Mr.Jadhav Sagar Ramesh	Lab Assistant	199.00
42	Mr.Shete Dhiraj Subhash	Lab-Assistant	199.00
43	Mr.Borase Dipak Pandurang	Lab Assistant	199.00
44	Mr.Maheshwari Vishal Rameshchandra	Lab Assistant	199.00
45	Mr.Sonawane Kishor Dhanraj	Lab Assistant	199.00
46	Mr.Nawale Sachin Vasant	Lab Assistant	199.00
47	Mr.Dorik Dipak Gokul	Lab Assistant	199.00
48	Mr.Indasrao Milind Dilip	Lab Assistant	199.00
49	Mr.Shaikh Farhan Yusuf	IT Support Engg	199.00
50	Mr.Shamrao Gulab Bhil	Peon	199.00
<b>Total</b>			<b>9,950.00</b>

**New Policy Member**

51	Ms.Jain Pooja Bhogilal	Physical Director	199.00
52	Mrs.Chaudhari suwarna suresh	Asst. Professor	199.00
53	Mrs.Mali Jyotsna Dhanraj	Asst. Professor	199.00
54	Miss. Jyotsana Dhanraj Mali	Asst. Professor	199.00
55	Miss. Harshada Laxman Chaudhari	Asst. Professor	199.00
56	Miss. Vishakha Kishor Magar	Asst. Professor	199.00
57	Miss. Mrunal Sanjay Bidkar	Asst. Professor	199.00
58	Mrs.Trupti A. Chaudhari	Asst. Professor	199.00
59	Miss Suchita Dnyaneshwar Jadhav	Asst. Professor	199.00
60	Miss.Bhagyashri Parmeshwar Patil	Asst. Professor	199.00
61	Mrs.Yeshi Sapana Suresh	T & Placement Officer	199.00
62	Mr.Rajendra Dhoman Sonar	Clerk	199.00
63	Mr.Vilas Shivaji Mali	Clerk	199.00
64	Mr. Manoj Sukhdeo Jadhav	Jr.Clerk	199.00
<b>Total</b>			<b>2,786.00</b>

**New Policy Member**

65	Mr.Krupal Dattatray Patil	Jr.Clerk	399.00
66	Mr.Kapil Sunil Sharma	Jr.Clerk	399.00
67	Mr.Badgujar Hemant Digabar	Lift Oprather	399.00
68	Mr.Mali Ritesh Bhagwan	Clerk	399.00
69	Mr.Birhade Pankaj Anant	Clerk	399.00
70	Mr.Pinjari Salman Chand	Lab Assistant	399.00
71	Mr.Bhil Amarsing Kamalsing	Peon	399.00
72	Mr.Pawara Bhupesh Dulba	Peon	399.00
<b>Total</b>			<b>3,192.00</b>

*(Signature)*  
**Director**  
**R.C.Patel Educational Trust**  
**Institute Of Management**  
**Research And Development**  
**Shirpur, Dist. Dhule**

## Policy Benefit Chart

## SHIRPUR EDUCATION SOCIETY R C PATEL EDUCATIONAL TRUST CO RCPIPER RCPIT HRPIPER HRP MAHILA RCP SR COL

<b>Policy Number</b>	OG-23-1911-8402-00000036	<b>HAT Reference Number</b>	123455		
<b>Risk Inception Date</b>	29-OCT-22	<b>Policy Active With other Insured</b>	0	<b>Pre Hospitalization Period[Days]</b>	30
<b>Risk Expiry Date</b>	28-OCT-23	<b>Policy Active With Bajaj Allianz</b>	1	<b>Post Hospitalization Period[Days]</b>	60
<b>Floater Details</b>	GMC Standard Policy	<b>Beneficiary Name</b>	CORPORATE	<b>Corporate A/C No</b>	

**Outpatient** No  
details

Relation	Coverage	Limit on Number of children	Entry age for child coverage	Beneficiary Name	Pre-Existing Diseases	% OF SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
EMPLOYEES	Covered		0	Not Applicable	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

<b>Maternity Benefit</b>	Not Covered	<b>Max liability on maternity exp</b>	<b>9 Months waiting period</b>	Not Applicable
<b>Limit for no of children</b>	0	<b>Co-payment for maternity</b>	<b>Max for normal delivery</b>	
<b>Max for LSCS</b>		<b>Corporate buffer</b>	<b>Per Family Maximum</b>	
<b>Corporate Buffer Amount</b>				
<b>Room Restrictions</b>	No			

**Claim Conditions**

- \* Previous Policy Number: OG-22-1911-8402-00000044
- \* Room Rent Restriction : No cap on room rent
- \* Emergency Ambulance : Ambulance charges covered upto INR 2500 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.
- \* Family Definition : Family definition  Employee
- \* Per Person Premium Type Per Person Age Band Wise / SI Wise

\* Other Conditions1 : Pre-post hospitalization is 30-60 days respectively.: Internal congenital diseases are covered, external is not covered.: Infertility treatment not covered under the policy.: Correction of refractive errors for eye correction is covered for eye power more than +/- 7. However the final decision will be taken by claims team on receipt of complete set of documents.

\* Other Conditions2 Covid Hospitalization expenses - The company shall indemnify Medical Expenses incurred for Hospitalization (Minimum 24 hrs hospitalization is mandatory) of the Insured Beneficiary during the Cover Period for the treatment of Covid on positive diagnosis of Covid in government laboratories or ICMR approved private laboratories including the expenses incurred on treatment of any comorbidity along with the treatment for Covid up to the Sum Insured specified in the policy. This also includes expenses incurred under Ayurveda, Yoga, Naturopathy, Unani, Siddha and Homeopathy systems of medicines. The company shall also indemnify Pre and Post Hospitalization expenses incurred related to an admissible hospitalization for the period as specified in the policy t and c.

\* Other Conditions3 : Covid Exclusions a)Expenses related to any admission primarily for diagnostics and evaluation purposes only. B)Any diagnostic expenses which are not related or not incidental to the Covid 19 diagnosis and treatment. C)Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes (i) Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons. (ii) Any services for people who are terminally ill to address physical, social, emotional and spiritual needs. C) Dietary supplements and substances that can be purchased w/o prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a Network Provider as part of Hospitalization claim or Home care treatment. d) Unproven Treatments: Expenses related to any unproven treatment, Contd.

\* Other Conditions4 : services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness. However, treatment authorized by the government for the treatment of Covid 19 shall be covered. e)Any claim in relation to Covid 19 where it has been diagnosed prior to Group Policy Start Date. f)Any expenses incurred on Day Care treatment

and OPD treatment.g)Testing done at a Diagnostic centre which is not authorized by the Government/ICMR shall not be recognized under this Group Policy.h)All covers under this Group Policy shall cease if the Insured Person travels to any country placed under travel restriction by the Government of India.i)Home Quarantine Treatment Expenses or treatment availed by the Insured Beneficiary at home for Covid-19.Other terms and conditions as per the agreed policy level benefits of the group medi-claim programme and standard policy wordings

\* Other Conditions 5 Modern Treatment Methods and Advancement in Technologies (as per below list) shall be restricted to 50% of Sum insured.- List - Uterine Artery Embolization and HIFU, Balloon Sinuplasty, Deep Brain stimulation, Oral chemotherapy, Immunotherapy- Monoclonal

ntibody to be given as injection, Intra vitreal injections, Robotic surgeries, Stereotactic radio surgeries, Bronchical Thermoplasty, Vaporisation of the prostate (Green laser treatment or holmium laser treatment), IONM -(Intra Operative Neuro Monitoring), Stem cell therapy - Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.50% Co-Pay for cyber-knife treatment, Gamma Knife treatment, Femto laser treatment for eye. It will be applicable for each eye each event. Cochlear Implant treatment shall be restricted to 50% of the SI

### **Maternity Conditions**

Maternity benefit Not covered

### **Enrollment Conditions**

Upon mutual agreement between the Insurer and the Group manager the claim settlement can be done by the Insurer either in favour of the Group Manager or the Insured Member. However, wherever it has been agreed to settle the claim in favour of the Group Manager, the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the Insured Member within 15 days of claim settlement to the Group Manager as per policy t&amp;amp;amp;c. The employer may utilize the insurance amount as part of the overall service benefit and pass on the balance, if any to the Insured Member.

### **Disclaimer :**



**Policy Benefit Chart**

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.
4. Incase of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

**Quote Dis-claimer :**

1.Continuity Guideline / Portability : Group to retail portability benefit can be availed at the time of retirement or resignation from the services ( provided these events are falling within the policy period) Portability option is available under the existing retail health products, std coverage□s, terms, conditions, & guidelines of retail product would apply. .

2.Claim Intimation and Submission of Documents : All reimbursement claims have to be intimated to Bajaj Allianz within 7 days of discharge and have to be submitted for reimbursement within 30 days of date of discharge of the patient. .

3.Guideline for Addition Endorsements : Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdation of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. .

4.Guideline for Deletion Endorsements : In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOA, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7days else intima-tion date will be consider for calculation subject to nil claim. .

5.Other Conditions : Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer Cochlear Implant treatment shall be restricted to 50% of the SI. Weight management services and treatment related to weight program's including treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HO once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy [subject to standard terms and conditions of Group Policy to be issued by us] to cover your employ-ees, you would, inter alia, will get additional advantage of online web integration [subject to accepting terms and conditions, disclaimers,] with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-house Health Adminis-tration Team, Bajaj Allianz General Insurance Company. Rest all as per attached Standard Group Health policy wording. .

**Health Administration Team , Bajaj Allianz General Insurance Company Ltd :**

**2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weikfield IT Park, Off Nagar Road, Viman Nagar**

**Phone :(020) 30512236 Fax : (020) 30512224**



## Bajaj Allianz General Insurance Company Ltd.

Bajaj Allianz House, Airport Road, Yerwada, Pune -411006

### Mediclaime Insurance - POLICY SCHEDULE

BAJHLIP21536V022021

#### Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc

301-302, Bhoomi Sarraswathi,, A-wing, Bldg No- 2,, Ganjawala Lane, Borivali, West, Mumbai-400092 PHONE NO 022-67317777

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GSTIN / UIN	27AAATT3071G1ZJ	Place of Supply/ State Code/ Name	27 - Maharashtra
Company GST No.:	27AABCB5730G1ZX	Policy Issued On	28-Oct-2022
Company PAN:	AABCB5730G	Invoice No.:	364351278/1
Period Of Insurance	From 00	29-Oct-2022	TO 28-Oct-2023 Midnight
Insured Name	Shirpur Education Society R C Patel Educational Trust Co Rcpiper Rcpit Hrpiper Hrp Mahila Rcp Sr College Rcp Bed Ded Rcpp Imrd		
Insured Address	C/O R C Patel Inst Of Technology, H R Patel Inst Of Pharmaceutical Education And Research, , Po Area - Shirpur,		
Loan Account No:	NA		
	, Dhule, Maharashtra - 425405		

Description	Sum Insured (Rs.)
Total 855 = Self 855 + 0 Dependents	17,10,00,000.00

<b>Base Premium</b>	<b>26,19,341.00</b>
<b>Special Discount</b>	
<b>Net Premium</b>	<b>26,19,341.00</b>
<b>Terrorism</b>	<b>0.00</b>
<b>Stamp Duty</b>	<b>0.00</b>
<b>State GST (9%)</b>	<b>2,35,741.00</b>
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<b>Final Premium</b>	<b>30,90,823.00</b>

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On specific request and subject to terms and conditions, record of information exchange will be made available.

#### HAT Reference Number:

<b>Scope Of Cover</b>	<b>As Per The Policy wording attached</b>
<b>Risk Covered</b>	<b>Total 855 = Self 855 + 0 Dependents</b>
<b>Special Perils</b>	<b>As per attached Group Mediclaime Policy Wordings and Benefit Chart</b>
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<b>Warrenties</b>	<b>As per attached Group Mediclaime Policy Wordings and Benefit Chart</b>
<b>Special Conditions</b>	<b>As per attached Group Mediclaime Policy Wordings and Benefit Chart</b>

#### Comments

#### Premium Collection Details:-[Receipt No/Collection No/Amount]

1911-00424627 / 327132467 / RS. 173520 , 1911-00424654 / 327132467 / RS. 43380 , 1911-00424703 / 327132467 / RS. 216900 , 1911-00424793 / 327132467 / RS. 1044735 , 1911-00001955-E / 327132467 / RS. 1162 , 1911-00424629 / 327132467 / RS. 57840 , 1911-00424626 / 327132467 / RS. 184365 , 1911-00424691 / 327132467 / RS. 480795 , 1911-00424628 / 327132467 / RS. 72300 , 1911-00424630 / 327132467 / RS. 54225 ,



1911-00424641 / 327132467 / RS. 224130 , 1911-00424927 / 327132467 / RS. 53061 , 1911-00424625 / 327132467 / RS. 469950 , 1911-00424700 / 327132467 / RS. 14460 ,

<b>Agency Code BAG10015138</b>	<b>Channel Name : ML</b>
<b>Agency Name : JYOTI K BAROT</b>	
<b>Contact No : 7666374401/0</b>	
<b>Email - kamalbarot2003@yahoo.com</b>	

**Principal Location : Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services.**

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.

Authorized Signatory  
Printed , Signed and Executed at Pune



This document is digitally signed, hence counter signature / stamp is not required

Regd Office : Bajaj Allianz House, Airport Road, Yerwada Pune-411006 (India), A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113, Corporate Identification Number U66010PN2000PLC015329.

Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH002405964202122M Defaced No. 0001482221202122 dated 05-JUL-21 timing 12:58:03 of General Stamp Office, Mumbai, India.

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## Bajaj Allianz General Insurance Company Ltd.

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Regt. No.113)

Regd Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006(India)

### HOSPITALS NOT ELIGIBLE FOR CASHLESS OR REIMBURSEMENT CLAIMS

Policy Number OG-23-1911-8402-00000036

Hospital name	City	Address Line	PinCode
AQUA LIFE CARE HOSPITAL - Navi Mumbai	MUMBAI	SHREE DURGA APT OFFICE 2 1ST FLR A WING PLOT NO-186 SEC 10 OPP JUIN-AGAR RLY STATION NR D MART MALL SANPADA (e) NAVI MUMABAI 400705 - MUMBAI - MAHARASHTRA	400705
EDEN NURSING HOME	BONGAON	Near Gobardanga Hindu College Tinamtala Machalandapur - BONGAON - WEST BENGAL	743235
ADITYA HOSPITAL-INDORE,GOYAL NAGAR.	INDORE	1/5 GOYAL NAGARBANGALI CHOURA-HAINDORE. - INDORE - MADHYA PRADESH	452016
KSDR HOSPITAL	BANGALORE	MAGADI MAIN ROAD BYADARHALLI - BANGALORE - KARNATAKA	560091
SRI ANUGRAHA HOSPITAL	BANGALORE	MAHADESHWAR NAGAR MAGADI MAIN ROAD MARUTHI NAGAR - BANGALORE - KARNATAKA	560091
Millenium Hospital - Navi Mumbai	NAVI MUMBAI	Plot no 19 Sector 40 Palm Beach Road Navi Mumbai Seawood (W) Nerul - NAVI MUMBAI - MAHARASHTRA	400001
Greater Malwa Hospital	INDORE	5 Prime City Sukhliya Main Road INDORE - INDORE - MADHYA PRADESH	452005
AASHIRWAD NURSING HOME & DIABETES CENTER - New Delhi	NEW DELHI - OTHERS	A29/3 Lions Enclave Marble Block Opp DDA Park Vikas Nagar Uttam Nagar - NEW DELHI - OTHERS - DELHI	110 059
VENUS HOSPITAL-HYDERABAD	HYDERABAD	D.NO.16-2-661/EFHG JUDGES COLONY MALAKPET HYDERABAD. - HYDERABAD - ANDHRA PRADESH	500036
MEDIMAX HOSPITAL ( A UNIT OF SARAS HEALTH CARE PVT. LTD) -Ghaziabad	GHAZIABAD	Pratap Vihar 12-PRATAP VIHAR K - 112 Sec - 12 Behind Santosh Medical - GHAZIABAD - UTTAR PRADESH	201 009
KRISHNA HOSPITAL-Delhi	DELHI	J-21 Main Road 4th Pusta Kartar Nagar. - DELHI - DELHI	110053
Kausthubh Nursing Home	MUMBAI - NAVI MUMBAI	Plot No 76 Sector 6 Behind Ganesh Market And Post Office Koperkhairane - - MUMBAI - NAVI MUMBAI - MAHARASHTRA	410210
Krishna Hospital - Vadodara	VADODARA	New Vip Road Opp. Vaikunth Bunglows - - VADODARA - GUJARAT	390022
GOPAL HOSPITAL - Ghaziabad	GHAZIABAD	Shanti Nagar Bus Stand Loni - - GHAZIABAD - UTTAR PRADESH	201102
Mehta Hospital	AHMEDABAD	57 Brahmin Mitra Mandal Society Ellisbridge - - AHMEDABAD - GUJARAT	380006
ANAND HOSPITAL - Vikas Puri, New Delhi	NEW DELHI - OTHERS	B - 52 New Krishna Park Dholi Piao Vikas Puri - - NEW DELHI - OTHERS - DELHI	110018
Govind Prabha Hospital - Surat	SURAT	Opp Ratnasagar School Kazis Maidan Gopipura - - SURAT - GUJARAT	395001
SHREE SAI BABA HOSPITAL	NASIK	vavives sinnar-shirdi highway sinnar ph 02551-224777 - NASIK - MAHARASHTRA	422022
SRI DEEPA HOSPITAL-BANGALORE	BANGALORE	5TH BLOCK VISHWESHVARIAH NAGAR NEAR UJLAL UPANAGAR BANGALORE-560056 - BANGALORE - KARNATAKA	560056
Kabeer Hospital Pvt.Ltd.	KANPUR	Yashoda Nagar (Near Bajrang Chauraha) Kanpur Nagar-208029. Phone - 0512 2620051 3243685; E-mail: hos pitalsofka-beer@gmailcomkabeerhospitalpvtltdkanpurg mail.com - KANPUR - UTTAR PRADESH	208011

### IMPORTANT

- 1.The above hospitals are not a part of the Bajaj Allianz General Insurance Network.
- 2.Cashless facility is not valid at any of the above hospitals.
- 3.Reimbursement of claims for treatment taken at these hospitals will not be accepted for reimbursement
- 4.The above hospital list can be modified without any prior notice. Kindly check with our Call Centre at or 1800 102 5858 (Bharti) or 020 - 30305858 (Others)

## Policy Benefit Chart

## SHIRPUR EDUCATION SOCIETY R C PATEL EDUCATIONAL TRUST CO RCPIPER RCPIT HRPIPER HRP MAHILA RCP SR COL

<b>Policy Number</b>	OG-23-1911-8402-00000036	<b>HAT Reference Number</b>	123455		
<b>Risk Inception Date</b>	29-OCT-22	<b>Policy Active With other Insured</b>	0	<b>Pre Hospitalization Period[Days]</b>	30
<b>Risk Expiry Date</b>	28-OCT-23	<b>Policy Active With Bajaj Allianz</b>	1	<b>Post Hospitalization Period[Days]</b>	60
<b>Floater Details</b>	GMC Standard Policy	<b>Beneficiary Name</b>	CORPORATE	<b>Corporate A/C No</b>	

**Outpatient** No  
details

Relation	Coverage	Limit on Number of children	Entry age for child coverage	Beneficiary Name	Pre-Existing Diseases	% OF SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
EMPLOYEES	Covered		0	Not Applicable	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

<b>Maternity Benifit</b>	Not Covered	<b>Max liability on maternity exp</b>		<b>9 Months waiting period</b>	Not Applicable
<b>Limit for no of children</b>	0	<b>Co-payment for maternity</b>		<b>Max for normal delivery</b>	
<b>Max for LSCS</b>		<b>Corporate buffer</b>		<b>Per Family Maximum</b>	
<b>Corporate Buffer Amount</b>					
<b>Room Restrictions</b>	No				

**Claim Conditions**

- \* Previous Policy Number: OG-22-1911-8402-00000044
- \* Room Rent Restriction : No cap on room rent
- \* Emergency Ambulance : Ambulance charges covered upto INR 2500 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.
- \* Family Definition : Family definition  Employee
- \* Per Person Premium Type Per Person Age Band Wise / SI Wise

\* Other Conditions1 : Pre-post hospitalization is 30-60 days respectively.: Internal congenital diseases are covered, external is not covered.: Infertility treatment not covered under the policy.: Correction of refractive errors for eye correction is covered for eye power more than +/- 7. However the final decision will be taken by claims team on receipt of complete set of documents.

\* Other Conditions2 Covid Hospitalization expenses - The company shall indemnify Medical Expenses incurred for Hospitalization (Minimum 24 hrs hospitalization is mandatory) of the Insured Beneficiary during the Cover Period for the treatment of Covid on positive diagnosis of Covid in government laboratories or ICMR approved private laboratories including the expenses incurred on treatment of any comorbidity along with the treatment for Covid up to the Sum Insured specified in the policy. This also includes expenses incurred under Ayurveda, Yoga, Naturopathy, Unani, Siddha and Homeopathy systems of medicines. The company shall also indemnify Pre and Post Hospitalization expenses incurred related to an admissible hospitalization for the period as specified in the policy t and c.

\* Other Conditions3 : Covid Exclusions a)Expenses related to any admission primarily for diagnostics and evaluation purposes only. B)Any diagnostic expenses which are not related or not incidental to the Covid 19 diagnosis and treatment. C)Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes (i) Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons. (ii) Any services for people who are terminally ill to address physical, social, emotional and spiritual needs. C) Dietary supplements and substances that can be purchased w/o prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a Network Provider as part of Hospitalization claim or Home care treatment. d) Unproven Treatments: Expenses related to any unproven treatment, Contd.

\* Other Conditions4 : services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness. However, treatment authorized by the government for the treatment of Covid 19 shall be covered. e)Any claim in relation to Covid 19 where it has been diagnosed prior to Group Policy Start Date. f)Any expenses incurred on Day Care treatment

and OPD treatment.g)Testing done at a Diagnostic centre which is not authorized by the Government/ICMR shall not be recognized under this Group Policy.h)All covers under this Group Policy shall cease if the Insured Person travels to any country placed under travel restriction by the Government of India.i)Home Quarantine Treatment Expenses or treatment availed by the Insured Beneficiary at home for Covid-19.Other terms and conditions as per the agreed policy level benefits of the group medi-claim programme and standard policy wordings

\* Other Conditions 5 Modern Treatment Methods and Advancement in Technologies (as per below list) shall be restricted to 50% of Sum insured.- List - Uterine Artery Embolization and HIFU, Balloon Sinuplasty, Deep Brain stimulation, Oral chemotherapy, Immunotherapy- Monoclonal

ntibody to be given as injection, Intra vitreal injections, Robotic surgeries, Stereotactic radio surgeries, Bronchical Thermoplasty, Vaporisation of the prostate (Green laser treatment or holmium laser treatment), IONM -(Intra Operative Neuro Monitoring), Stem cell therapy - Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.50% Co-Pay for cyber-knife treatment, Gamma Knife treatment, Femto laser treatment for eye. It will be applicable for each eye each event. Cochlear Implant treatment shall be restricted to 50% of the SI

### **Maternity Conditions**

Maternity benefit Not covered

### **Enrollment Conditions**

Upon mutual agreement between the Insurer and the Group manager the claim settlement can be done by the Insurer either in favour of the Group Manager or the Insured Member. However, wherever it has been agreed to settle the claim in favour of the Group Manager, the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the Insured Member within 15 days of claim settlement to the Group Manager as per policy t&amp;amp;amp;c. The employer may utilize the insurance amount as part of the overall service benefit and pass on the balance, if any to the Insured Member.

### **Disclaimer :**

## Policy Benefit Chart

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.
4. Incase of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

### Quote Dis-claimer :

- 1.Continuity Guideline / Portability : Group to retail portability benefit can be availed at the time of retirement or resignation from the services ( provided these events are falling within the policy period) Portability option is available under the existing retail health products, std coverage□s, terms, conditions, & guidelines of retail product would apply. .
- 2.Claim Intimation and Submission of Documents : All reimbursement claims have to be intimated to Bajaj Allianz within 7 days of discharge and have to be submitted for reimbursement within 30 days of date of discharge of the patient. .
- 3.Guideline for Addition Endorsements : Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdation of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. .
- 4.Guideline for Deletion Endorsements : In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOA, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7days else intima-tion date will be consider for calculation subject to nil claim. .
- 5.Other Conditions : Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer Cochlear Implant treatment shall be restricted to 50% of the SI. Weight management services and treatment related to weight program's in-cluding treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new em-ployee, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HO once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy [subject to standard terms and conditions of Group Policy to be issued by us] to cover your employ-ees, you would, inter alia, will get additional advantage of online web integration [subject to accepting terms and conditions, disclaimers,] with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-house Health Adminis-tration Team, Bajaj Allianz General Insurance Company. Rest all as per attached Standard Group Health policy wording. .

**Health Administration Team , Bajaj Allianz General Insurance Company Ltd :**

**2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weikfield IT Park, Off Nagar Road, Viman Nagar**

**Phone :(020) 30512236 Fax : (020) 30512224**



Out Ward No. : SES/ /2

Date : / / 20  
दिनांक 13-09-2023

प्रति,  
प्राचार्य /मुख्याध्यापक,  
प्राथमिक, माध्यमिक, उच्च माध्य., वरिष्ठ व व्यावसायिक महाविद्यालये,  
आर.सी.पटेल शैक्षणिक संकुल, शिरपूर

**विषय :- पोस्टाची कर्मचारी अपघात विमा पॉलिसी नुतनीकरण करणे विषयी...**

वरील विषयान्वये संस्थेतील सर्व मुख्याध्यापक व प्राचार्य यांना सूचित करण्यात येते की, मागील वर्षी संस्थेतील कर्मचाऱ्यांची पोस्ट ऑफिस कडून TATA AIG अपघाती विमा पॉलिसी (रु.399/-) काढण्यात आली होती. सदर पॉलिसीचे हयावर्षी नुतनीकरण करणेबाबत संस्थेचे माननीय उपाध्यक्ष श्री. राजगोपालजी भंडारी साहेब व माझी शिरपूर पोस्ट ऑफिस निरीक्षक (IP) मा.श्री. आहुती रंजन साहेब, यांचेसोबत मिटींग झाली आहे. त्यानुसार संस्थेच्या सर्व शाखांमधील कर्मचाऱ्यांची सदर विमा पॉलिसी Renewal करण्याचे सांगितले आहे. याकरीता पोस्ट ऑफिस कडून कर्मचारी आपल्या शाखांना भेटी देतील त्यांना विमा पॉलिसी नुतनीकरण करणेकामी योग्य ते सहकार्य करावे.

- याबाबत खालीलप्रमाणे सूचना देण्यात येत आहे.

1. उपरोक्त अपघात विमा पॉलिसी आपल्या संस्थेतील कर्मचाऱ्यांचे दृष्टीने हितावह असल्यामुळे संस्थामार्फत सदर पॉलिसी करीता संस्थेचा योगदान / हिस्सा योजना खालील प्रमाणे राहिल -

पोस्टाची योजना	संस्थेची योजना
एका व्यक्तीस वार्षिक हप्ता - रु.399/- खाते उघडणे (एकदाच) - रु. 100/- एकुण -रु. 499/-	संस्थेतील ज्या कर्मचाऱ्यांचा पगार रु. 15000/- च्या पेक्षा अधिक आहे त्यांना - वार्षिक हप्ता - रु. 200/- खाते उघडणे - रु.100/- (एकदाच सुरवातीला) एकुण - रु. 300/- (कर्मचारी हिस्सा)
	संस्थेतील ज्या कर्मचाऱ्यांचा पगार रु. 15000/- पेक्षा कमी आहे त्यांना - फक्त खाते उघडणे करिता - रु. 100/- (कर्मचारी हिस्सा) एकदाच लागतील त्यांचे सर्व हप्ते संस्था अदा करेल.



SHIRPUR EDUCATION SOCIETY

Central Office : R. C. Patel Main Building, Near Shirpur Telephone Exchange, Shirpur Dist. Dhule

Tel : (02563) 251005, 255238, 258213 Email : ses.centraloffice@gmail.com





Out Ward No. : SES/ /2

Date : / / 20

2. याआधी पॉलिसी काढलेल्या कर्मचाऱ्यांना Renewal साठी आपले पोस्टातील Digital Account मध्ये किमान रु. 400/- एवढी रक्कम शिल्लक राहू देणेस सूचित करावे. पोस्टातील कर्मचारी आपल्या शाळा / कॉलेजेसला येवून सदरील कर्मचाऱ्यांची पॉलिसी Renewal करतील.
3. नवीन कर्मचाऱ्यांसाठी - आपल्या शाखेत नवीन नियुक्त झालेल्या कर्मचाऱ्यांचे पोस्टात Digital Account उघडण्यात येईल. पोस्टातील कर्मचारी आपल्या शाळा / कॉलेजेसला येवून Digital Account उघडणे व Online Policy घेणे करीता येतील यासाठी एका व्यक्तीस फक्त 5 मिनीटांचा कालावधी लागेल. त्यासाठी आवश्यक कागदपत्रे -
  - i. आधार कार्ड
  - ii. मोबाईल नंबर व ई मेल आयडी
  - iii. नॉमिनी तपशिल (नांव, वय, जन्म तारीख व आधार कार्ड नंबर)
4. संस्थामार्फत संस्थेचा हिस्सा अदा करण्यात येईल. त्याकरीता आपल्या शाखेतून पगार निघत असलेल्या कर्मचाऱ्यांची खालील नमुन्यात माहिती संस्थेत दिनांक 16 सप्टेंबर 2023 पर्यंत जमा करावी. रु.15 हजार च्या पेक्षा अधिक व रु.15 हजार च्यापेक्षा कमी पगार असलेल्या कर्मचाऱ्यांची स्वतंत्र यादी सादर करावी. आपण दिलेल्या माहितीच्या आधारे शाखानिहाय एकत्रित रक्कम मंजूरी यादी आपणांस पाठविण्यात येईल. संबंधित कर्मचाऱ्यांना रक्कम अदा करावी.  
शाळेचे नांव -
  - रु.15 हजार पेक्षा अधिक कर्मचारी संख्या - \_\_\_\_\_
  - रु.15 हजार च्या पेक्षा कमी कर्मचारी संख्या - \_\_\_\_\_

अनं.	कर्मचाऱ्याचे नांव	हुद्दा	संस्था हिस्सा रक्कम रु. (Rs.199/- OR Rs.399/-)



*Umesh Sharm*

मुख्य कार्यकारी अधिकारी  
शिरपूर एज्युकेशन सोसायटी

SHIRPUR EDUCATION SOCIETY

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