

**DELHI DEVELOPMENT AUTHORITY  
WELFARE SECTION**

Application for grant of Recreational facilities viz holiday camp study tour to employees/wards.

1.	Name of the DDA employee	
2.	Father's/Husband Name of DDA employee	
3.	Date of birth	
4.	Date of Apptt. sin DDA	
5.	Designation	
6.	UID NO.	
7.	Pay Band/Grade Pay (attached latest Pay Slip)	
8.	Department/Division	
9.	Contract No./Mobile No.	
10.	Address	
11.	Specify option out of the Recreational facilities (the list circulated by Welfare Deptt.)	

The employee photo is to be attested by the concern in-charge.

**Declaration**

I hereby declared that all the facts as stated above by me are true that I/my son/my daughter have not attended any camp in the past. That I will follow all rules/regulations as prescribed during the stay at camp & any violation/defiance would result for such action as deemed fit for consideration by the administration.

Signature of the Employee

Sign/Stamps of In-Charge

Medical Certificate

It is certified that Smt. \_\_\_\_\_ W/o  
D/o \_\_\_\_\_ Designation \_\_\_\_\_ possesses good  
health for travel.

Sign/Stamps of Medical Officer