



CENTRAL GOVERNMENT EMPLOYEES WELFARE COORDINATION COMMITTEE, CHANDIGARH

Ministry of Personnel, Public Grievances and Pensions
Department of Personnel and Training, Government of India

Website: cgewccchd.com

Ref.:Ref.CGEWCC/2024/978

Dated: 7/3/25

Chairperson

Sh. Rajpal Yadav,
Vice President,
Income Tax Appellate Tribunal,
Kendriya Sadan, Sector-9A,
Chandigarh.
0172-2742765

Secretary

Dr. Amarjit Kaur,
Senior Regional Director,
Health & Family Welfare
4th floor, Kendriya Sadan,
Sector-9A, Chandigarh.
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Joint Secretary (I)

Ms. Monika, Sr. AO,
Pr. Accountant General (Audit),
Punjab Chandigarh,
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Joint Secretary (II),

Sh. Sanjay Jharbade,
Asstt. Engineer,
CPWD, Kendriya Sadan, Sector-
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Organizing Secretary,

Shri Deepak Kumar Dhingra,
Sr. Audit Officer, PAG (Audit),
Punjab, Sector-17, Chandigarh.
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Treasurer,

Shri Balram Krishan,
Senior Auditor,
PCDA(A),
Sector-9A, Chandigarh.
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EMPANELMENT OF AMA's FOR CENTRAL GOVT. EMPLOYEES-2025-26

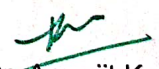
Applications are invited for the empanelment of Authorized Medical Attendants for Central Govt. Employees and their families, residing in Chandigarh, Panchkula & Mohali for the period from 01st May, 2025 to 30th April, 2026. Homeopathy, Allopathy & Ayurvedic Doctors from the tricity may send their application with

- Request on letter head.
- Verification Form duly complete with photographs.
- Copies of MCI certificate of Registration, Graduation and Post Graduation certificates (not required for AMAs of 2024-25).
- Affidavit and a cheque of Rs. 1000/- in favor of Secretary, CGEWCC, Chandigarh.

The dully filled application in all respects should reach to Secretary, CGEWCC Chandigarh, O/o Senior Regional Director, Regional Office for Health & Family Welfare, Room No. 419, 4th Floor, Kendriya Sadan Sector-9A Chandigarh before 31st March, 2025. Incomplete forms will not be entertained.

Please visit our website cgewccchd.com for the list of documents required & the list of approved AMA's for the year 2025-26.

Sincerely yours,


(Dr. Amarjit Kaur)
Secretary, CGEWCC,
Kendriya Sadan-9, Chandigarh

Letter Head of the Practioners

To,

The Secretary,
CGEWCC,
Chandigarh.

Letter Head of the Practioners
Subject:- Empanelment for AMA for the year 2025-26 under CSMA rules for Central Govt. Employees of Tricity

To,
Respected Madam,

I am willing to get empanelled as Authorized Medical Attendant (AMA) for the year 2025-26 under CSMA rules for Central Govt. Employees and their families residing at Tricity, for a period of one year (from 1st April 2025 to 31st March, 2026).

Abiding the terms and conditions under CSMA rules, I Certify that I will not charge more than Rs 200/- (for General Practioners) and Rs 350/- (for Specialist) as consultation fee as per terms & conditions of CSMA rules 1944.

Thanking you,

Yours Sincerely,
Signature

Dr.....

MCI No.....

Sample Affidavit

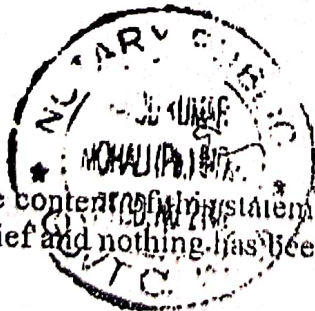
AFFIDAVIT

1. [REDACTED] D/o Sh. [REDACTED] R/o H.No. [REDACTED], Sector [REDACTED] SAS Nagar, Tehsil & Distt. S.A.S. Nagar, Punjab do hereby solemnly affirm declare as under:-

1. That I am a practicing doctor under the name of [REDACTED] Homoeo Clinic, at [REDACTED] Sector [REDACTED] SAS Nagar (Mohali) Tehsil & Distt. S.A.S. Nagar, Punjab.
2. That I am registered with the Council of Homoeopathic System of Medicine Punjab and my registration No. [REDACTED] I am B.H.M.S., Doctor doing Homoeopathic practice.
3. That I have gone through Central service (medical attendance) rule 1944 and orders issued from time to time at agree to abide by the condition laid down, I also agree to a bid by orders issued in this connection from time to time.
4. That I shall charge consultation and injection fee at the prescribed rates as may be modified from time to time.
5. That I have noted that my nominations as authorized medical attendant does not confer any right to be confirmed authorized medical attendant and that nominations could be terminated at time by the nominating authority without assigning any reasons or giving at any notice.
6. That I have not been punished by any consumer or civil court in any case nor any case is pending in any court against me.

Verification: -

Verified that the content of my statement of mine is true and correct to the best of my knowledge and belief and nothing has been concealed therein.



[REDACTED]
Signature of registered
Medical practitioner,

[REDACTED]
Signature of registered
Medical practitioner

M.