

To : The Principal Secretary
Department of Youth Services & Sports
Government of West Bengal
New Secretariat Building, Block – A, 6th Floor
1, Kiran Sankar Roy Road, Kolkata – 700001

Sub : **Inclusion of name under Swasthya Sathi Scheme.**

Sir,

I am a former _____ player and participated in International / National / State level competition and retired from my discipline in the year _____.

For medical treatment and medical benefit, I would like to be enrolled under Swasthya Sathi Scheme of Government of West Bengal.

Hence, my name along with my family members may be considered for Swasthya Sathi Scheme.

My personal particulars are given in Form – B (attached).

1. Particulars of Sports :

Name of the Competition	Organised by	Year	Position / Rank

I do solemnly declare that the particulars given above and in form – B are true and correct.

Yours faithfully,

Date :

Enclo :- Form – B
and other particulars.