## (To be used by the employee)

To
The Registrar
Bengal Engineering and Science University, Shibpur
Howrah – 711103

Subject:- Application for payment of annual accumulation under the GSLIS, BESUS.

Sir,

I have been a mer	mber of the Group Savir	ngs Linked Insurance	Scheme (GSLIS)
BESUS. Since	** I have re	etired from service after	attaining the age
of Years	s / I have ceased to be	in employment with t	he BESUS w.e.f.
I v	was holding the post of	E	Before retirement
ceassation of employment	with the BESUS, I reques	st that the amount due	to me under the
GSLIS may be paid to me.			
		Yours faithfully	/,
	(		)
Address:			

## Date:

(PRESERVED)

<sup>\*</sup> Designation and Address of the Head of the Department Office

<sup>\*\*\*</sup> Month and the year of becoming a member of the Scheme may be indicated here.