

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

The Chief Medical Officer
Central Government Health Scheme
[Office Address]
[City, State, Zip Code]

Subject: Application for Membership in CGHS

Dear Sir/Madam,

I am writing to apply for membership in the Central Government Health Scheme (CGHS) for myself and my family. I am a [Your Designation/Position] and have completed the necessary eligibility criteria for enrollment.

Please find below the details of my application:

1. ****Personal Details****:

- Name: [Your Name]
- Date of Birth: [DOB]
- Enrollment ID (if applicable): [ID]
- Department: [Your Department]

2. ****Family Details****:

- Spouse Name: [Spouse Name]
- Children Names: [Children Names] (if applicable)

3. ****Documents Attached****:

- Copy of identity proof
- Service certificate
- Family declaration form
- [Any other relevant documents]

I look forward to your favorable response regarding my application. Please let me know if any further information or documentation is required.

Thank you for your attention to this matter.

Yours sincerely,

[Your Signature (if sending a hard copy)]
[Your Name]