University of Sri Jayewardenepura

MEDICAL INSURANCE SCHEME

OPD Claim Form

EMP No: ……

Scheme	I		II		III		IV	
	A	B	A	B	A	B	A	B

No	Details	√
1	No of bills	
2	Nature of Illness	
3	Prescription	
4	Original	
5	Doctor's seal/ Date	

Name of Applicant: (Rev/Prof/Dr/Mr/Mrs/Ms) ……...

……

Designation: …… Department: …….. Age: ……

Telephone No (Office/Mobile): …… Single ☐ or Married ☐

[The application form should be submitted with all the bills pasted on the separate paper and ensure that all the bills contain the dates and the seal or letter head of the Doctor. Duly completed application form should be put into the box after entering the register which keep at the Establishments (Information & Services) Division]

Details regarding bills (Medical/Hospital/Pharmacies)

(While the Doctor's Prescription should be annexed to bills obtained from pharmacies, all required documents to substantiate the information provided below should be submitted along with the application form.)

Bill No	Date of the Bill	Name / Names of patient/s who has received treatment	Relationship to Applicant	Purpose	Amount Rs.
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

I hereby state that I have claimed Rs…….. as Medical expenses as aforesaid and that the information provided in the claim form are true and accurate.

Date: ……. ……

Signature of Applicant

Academic Staff member of the Medical Faculty

The information given by the applicant and the document attached herewith have been checked and with respect to the diagnosis / recommendation by medical officer was found to be accurate.

Date: …… .....

Signature & Seal of the
Academic Staff member of the Medical Faculty

Recommendation of the Assistant Registrar/ Establishments (Information & Services)

After considering the receipts and other information provided by the applicant in relation to the medical treatment received. I recommend the reimbursement of total expenses / an amount of Rs. ……of total expenses incurred by him/her in the connection.

Date:…… ……...

Signature of the Assistant Registrar
Establishments (Information & Services)