



www.sonamukhicollege.ac.in
SONAMUKHI COLLEGE

23°17'41.2"N 87°24'32.9"E
P.O. & P.S. - Sonamukhi, Dist.-Bankura,
West Bengal, India -722 207

Communication :: info@sonamukhi college.ac.in
Students' Gateway :: students@sonamukhicollege.ac.in
Call # +91-3244-275251
NAAC: B+ 2022
AISHE : C-44762

Ref. 2026/0921321/sc/2/WBHS.

12/10/2026.

NOTICE

(u/c)
All teaching staff members are hereby informed that, as per the Government Order No. 92-F (MED) WB, dated 09.10.2026 those enrolled under the West Bengal Health Scheme (WBHS) must surrender their Swasthya Sathi and/or Ayushman Bharat Cards, if held by themselves or their beneficiaries, and submit the prescribed declaration along with proof of surrender by 31st October, 2026.

All concerned are requested to take necessary action within the stipulated time.

Pandit

Convener
West Bengal Health Scheme sub-committee

B. Mandal
12/10/26

Dr. Bappaditya Mandal
(Principal & Chairperson)
Principal
Sonamukhi College
Sonamukhi, Bankura



Government of West Bengal
Medical Cell, Finance Department
2nd Floor, Khadya Bhavan,
11A, Mirza Ghalib Street, Kolkata-700087

No.: 92-F(MED)WB

Date: 09.10.2026

ORDER

Subject: Mandatory Surrender of Swasthya Sathi and/or Ayushman Bharat Cards by all Employees and Pensioners, including those from All India Service (AIS), and their Beneficiaries enrolled under WBHS

It has come to the knowledge of the Government that certain employees and pensioners, including those from the All India Service (AIS), **may be holding** Swasthya Sathi and/or Ayushman Bharat cards for themselves and/or their beneficiaries, despite being enrolled under the West Bengal Health Scheme (WBHS).

Accordingly, the Governor is pleased to issue the following directives:

- **Mandatory Surrender:** All categories of employees, pensioners (including AIS officers), and their enrolled beneficiaries who possess such cards are directed to **mandatorily surrender** their Swasthya Sathi and/or Ayushman Bharat cards with immediate effect to the respective issuing authority.
- **Submission of Declaration:** Only those employees and pensioners who hold/held such cards for themselves or their beneficiaries are required to submit a formal declaration in the prescribed format (**Annexure-A**), along with the proof/acknowledgment of surrender.
- **Receiving Authority:** The declaration and surrender proof must be submitted by the concerned employees to their respective Head of Office, and by the pensioners to their respective office where they are required to submit their **WBHS** claim, if any.
- **Deadline:** The process of surrendering the cards and submitting the declaration must be completed immediately but latest by **31st October, 2026**.
- **Administrative Responsibility:** All Heads of Offices, DDOs, and Pension Sanctioning Authorities are directed to receive these declarations, verify the enclosed proof of surrender, and maintain a compliance log.

Failure to comply with the directions issued under this Order within the prescribed time limit shall entail strict administrative action. Such non-compliance will result in the temporary suspension of all medical facilities and benefits extended under the West Bengal Health Scheme (WBHS) and, in the case of an employee, shall additionally constitute misconduct, leading to the immediate initiation of formal disciplinary proceedings under the applicable Service Rules.

Attested
B. N. Mishra
Principal
Sonamukhi College
Sonamukhi, Bankura

Khalid A. Anwar
Khalid A. Anwar
Secretary to the Govt. of West Bengal
Finance Department

ANNEXURE - A

DECLARATION OF SURRENDER BY THE EMPLOYEE / PENSIONER ENROLLED UNDER WBHS

(To be submitted only by those who hold/held SwasthyaSathi and/or Ayushman Bharat cards)

- Name of the Employee/Pensioner (in Block Letters): _____
- Aadhaar Number: _____
- Designation / Last Designation Held: _____
- Office/Department Name: _____
- WBHS Enrolment ID No: _____
- HRMS Id *((For Employees only))*: _____
- GPF A/C No *(For Employees only)*: _____
- PPO Number *(For Pensioners only)*: _____
- Mobile Number: _____

DECLARATION

I, Shri/Smt. _____, hereby declare that I / my dependent beneficiary(ies) listed below held the following healthcare card(s), which have now been successfully surrendered to the respective issuing authority:

(Please fill in the card details as applicable)

- Swasthya Sathi Card (Card No: _____)
- Ayushman Bharat Card / PM-JAY (ABHA ID/Card No: _____)

DEPENDENT BENEFICIARY DETAILS

(Please list all dependent beneficiaries who held the surrendered cards)

Sl. No.	Name of the Beneficiary	Relationship with the Enrolled person	Aadhaar Number

As required, a copy of the official surrender acknowledgment/receipt issued by the respective authority is enclosed herewith as proof.

I hereby certify that the information provided above is **true and correct** to the best of my knowledge.

Date: _____

Place: _____

Handwritten Signature
Principal
Sonamukhi College
Sonamukhi, Bankura

(Signature of the Employee / Pensioner)