



DEPARTMENT OF GEOLOGY AND MINES
STAFF WELFARE SCHEME

FORM B – CHANGE OF BENEFICIARY(S)

ELIGIBILITY FOR CHANGE OF BENEFICIARY(S):

1. If the member was not married when joining SWS-DGM.
2. If member remarries during their active membership in SWS-DGM.

A. APPLICANT DETAILS:				
Name: *				
CID No.: *				
Reason(s) for Change (tick): *	Not married when joining SWS-DGM		Re-marriage:	

B. CHANGE OF BENEFICIARY(S):				
i. Direct Beneficiary(s):				
Existing Beneficiary(s)		New Beneficiary(s)		
Name*	CID No.*	Name*	CID No.*	D.O.B*

ii. In-direct Beneficiaries (member can replace two in-direct beneficiaries for those unclaimed in-direct beneficiaries only):				
Existing Beneficiaries		New Beneficiaries		
Name*	CID No.*	Name*	CID No.*	D.O.B*

DECLARATION
<p><i>By signing this form, I hereby declare that I have read and understood the Article of Staff Welfare Scheme of Department of Geology & Mines (SWS-DGM) and agree to abide by the provisions of Article of Staff Welfare Scheme.</i></p>

Date:	<p>(Affix legal stamp)</p> <p>(Applicant's Signature)</p>
Place:	

FOR OFFICIAL USE	
Endorsed by:	
1. <i>Chairman</i>	2. <i>Vice Chairman</i>
3. <i>Secretary</i>	4. <i>Treasurer(s)</i>
<i>Remarks:</i>	