

**DIRECTORATE OF SOCIAL WELFARE
JAMMU/SRINAGAR**

Application Form for availing financial assistance for the Marriage of
daughters of Widows/Destitute Women of schedule Castes

1.	Full Name and Address of the Applicant	
2.	Husband Name	
3.	Permanent Address	
4.	Caste(Attach Proof)	
5.	Domicile(Attach Proof)	
6.	Whether the Woman is Widow/destitute or guardian	
7.	Death Certificate of Husband in case of a widow and certificate from Sarpanch of village or a Gazetted Officer	
8.	Whether the applicant has earlier taken the grant before this if so, for how many times and when please give the year in which subsidy was received	
9.	Name and Address of the Sureties (Govt. Employees) Please indicate attach affidavit and salary Certificate	
10.	Documents Attached	

Signature of Applicant

Affidavit

I _____ resident of _____ do hereby solemnly affirm and declare as under :-

1. That I have applied for Financial assistance of Rs 10,000/- (Rupees ten thousand only) to the Directorate of Social Welfare to the Social Welfare Department Jammu.
2. That I am a Widow.
3. That I am the Mother of the bride..... who is solemnized and who is above 18 years.
4. That my family income source is above Rs..... per annum.
5. That I belong to..... Caste.
6. That I will submit a utilization Certificate including details of expenses within 15 days after the marriage is solemnized.

Deponent