

**APPLICATION FORM FOR FINANCIAL ASSISTANCE FROM
FLAG DAY FUND**

PART - I

1. Name: _____
2. Father's Name: _____
3. Age of the applicant: _____
4. Regimental Number and Rank: _____
5. Address - Village: _____ Post Office _____
Tehsil _____ District: _____
6. Unit in which last served: _____
7. Length of service: _____ Years, _____ Months _____ Days.
8. Date and cause of discharge: _____
9. Cause of financial assistance: _____

10. Amount applied for: Rs. _____
11. Amount of pension, if any: _____
(State whether service, family or disability and in case of the last named, whether the disability was due to war or peace conditions). If not in receipt of pension, has one been applied for, and if so, when?
12. Amount of children's allowance, if any: _____
13. Annual net income from other sources, if any:-
 - i) Approximate area of any land: _____
 - ii) Irrigated: _____
 - iii) Un-irrigated: _____
 - iv) Estimated yearly net income from land: _____
 - v) Estimated yearly net income from any other source: _____

14. Amount of debts, if any: _____

15. Date, amount and source of any previous: _____ relief grant
also date of any previous application for a relief grant.

16. Whether the applicant is able bodied _____ and able to
work for a living. If unable to work for a living, the reasons should be given.

17. Number of dependents giving relationship in all cases and, in that of Children, the sex
and age of each (Dependents are Wife, Sons less than 18 years of age, unmarried daughters
less than 18 years of age, Widowed Mother and Father if the latter is infirm and unable to
support himself:-

<u>Name</u>	<u>Age</u>	<u>Relation</u>	<u>Remarks</u>
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Signature/Thumb Impression of applicant

PART II - Recommendation by the Welfare Worker:-

1. Summary of any reasons for _____ recommending financial
assistance which are not already mentioned above. (if it is desired that the case should be
treated as 'special' full reasons for such recommendations must be given).

2. Amount and nature of grant recommended: _____

3. Purpose for which, grant is to be devoted: _____

Signature of Welfare Worker

PART III - Amount Sanctioned/Not Sanctioned.

Signature of DDSW/ADSW