



Government of Orissa

Department of General Administrations

FORM OF APPLICATION FOR ASSISTANCE TO CHIEF MINISTER'S RELIEF FUND OF ORISSA

CHIEF MINISTER'S RELIEF FUND

Needy and distressed applicants seeking assistance from the Chief Minister's Relief Fund are required to apply in the prescribed application form reproduced below:

PART A

1) a) Name of the applicant :-

b) Father's/ Husband/ Guardian's Name:-

2) Address:

Village:

Ward No :

P.S.:

P.O.:

Tahasil:

Sub-Division:

District:

3) Occupation:

4) Annual Income: Rs.

/-

Govt. Service	Source of Business	Source of Lands	Any other Sources	Total Income
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Rs. <input type="text"/> /-
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Rs. <input type="text"/> /-
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Rs. <input type="text"/> /-
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Rs. <input type="text"/> /-

5) Purpose

6) Required Amount

Rs. /-

7) Has he/she received any assistance from this fund earlier ?

Yes No

8) If yes, amount & purpose

Rs. /-

Date.

Signature of the Applicant

9) Recommendation of the Tahasildar/Sub-Collector(Concerned officer should know correctly the fact mentioned at Colum No.4)

a) Details of income of the Applicant

Rs. /-

i) From Agriculture :

Rs. /-

ii) From Salary :

Rs. /-

iii) From other sources :

Rs. /-

iv) **Total** :

Rs. /-

a) Financial condition of near relatives :

b) Is prayer of the Applicant acceptable

Yes No

c) Remarks :

Signature of Tahasildar/Sub-Collector

(With seal)

Recommendation of Medical Officer :-

a) Disease :

b) What type of treatment required

c) Cost of the Medicine :

Rs. /-

d) Apparatus :

e) Any other expenditure

Rs. /-

f) Place of treatment :

i) The reason for recommending treatment outside the State :

ii) Is such treatment available in Orissa?:

Yes No

Signature of Medical Officer.

(With seal)

Counter Signature of Head of the Institute

(With seal)

11) Recommendation of M.L.A./M.P./Minister

**Signature of
M.L.A./M.P./MINISTER**

(With Seal)