	REGISTRATION F	ORM - W	/IDOWS	/ WAR WIDOWS	S OF EXS	SERVICEMEN	
1.	Name					G. G.	
2.	Date of Birth / Age					Stamp Size Photograph	
3.	Address						
	Tehsil or Police Statio	n		Tele			
4.	Particulars of husband	l:					
	No.		Date of Enrolment				
	Rank		Date of	discharge			
	Name		Dischar Date	ge Book No. &			
	Decoration		Regt / C	Corps	PPO	O No. & Date	
	Religion:		Caste:				
5.	Details of husband's D	Death:					
	War / Operation		Attrib	utable			
	Non Attributable		After l	Retirement			
6.	Details of family (only dependent children upto 25 years and dependent parents of deceased Ex-Servicemen)						
	Name	Age	Relatio	nship		Educational Qualification	
(i)							
(ii)							
(iii)							
(iv)							
(v)							
(vi)							

(vii)									
7.	Amount of Family On Pension:		Ordinary Family Pension Rs.		Special Family Pension Rs.				
				I	Liberalised Sp	ised Special Family Pension Rs.			
8.	Lump sum payment Received by her & hu				sband:				
	Gratuity Rs.		Group Insurance Rs.			l			
	Leave encashment Rs. Finance			nancial A	Assistance Rs				
	Commuted Pension Rs.								
9.	Present occupation & monthly income								
	Service Rs.				Business / Industry Rs.				
	Agriculture Rs.				un-employed				
10.	Other relevant information, if any.								
11.	Identification Marks:								
12.	Left Thumb Impression	n:							
DECLARATION									
I hereby declare that the above information is true to the best of my knowledge and belief.									

Date:

Place:

Signature of Applicant.

FOR OFFICE USE

Status as Widow	:	Yes / No.
		X7 X7'1
Category		War Widow
		Attributable
		Non Attributable
		After Retirement

No. & Date of Identity Card issued.

Date:	Signature
Bute.	51511

Secretary,

Place: DSS&A Board

with Office Stamp &

Date.