

PERSONAL APPLICATION CUM FINANCIAL CONDITION REPORT: MARRIAGE GRANT
(Only for Two Daughters/Widow of ESM upto Havildar)

PERSONAL APPLICATION

The Secretary
Kendriya Sainik Board

1. I am _____ a pensioner/non-pensioner daughter/widow of ESM.
I request for marriage/re-marriage grant out of RMDF.

Particulars of ESM

2. Name

3. Service No.

 Rank

4. Present Address:

5. **Dates** (dd/mm/yy)
Enrolment

 Discharge

 Death

(Strike out if not Applicable)

6. **Reasons for discharge:**

(As in Discharge Certificate)

7. **Character at the time of discharge:** Exemplary/Very Good/Good/Fair/Bad
(Strike out whichever is not applicable)

8. **Dependents of ESM** Son/Daughter
a) Wife: _____ d) _____
b) Mother: _____ e) _____
c) Father: _____ f) _____
g) _____

9. **Actual date of Solemnization** (dd/mm/yy)

10. **Additional Information if any (including Mobile No)**

Financial Condition Report

11. (a) Pension (Basic pm for pensioners) Rs

(b) Monthly income for non-pensioners : Rs.

(from others sources)

12. If re-employed, income there from: Rs.

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13. Details of Financial Assistance received in past from KSB/RSB/ZSB
(Name of grant _____ Amount _____, year _____).

Bank Details

14. Name of the Bank :- _____
15. IFSC Code of Bank:- _____
16. Account No.:- _____

Declaration

17. I understand that this is a grant only and I have no legal right on the amount requested for. I am entitled to marriage grant once only for two daughters/widow out of RMDF.
18. I hereby declare that the information furnished in personal application cum financial condition report is correct to the best of my knowledge

Name & Relationship

(Signature/Thumb impression of the applicant)

RECOMMENDATIONS BY ZSWO

19. Following original documents of ESM/Widow./Orphan have been personally checked by ZSW Officer (Photocopies attested by ZSWO are attached): -
- a) Complete Discharge Certificate/book.
 - b) Age (not below 18 Yrs) proof of the daughter.
 - c) Marriage certificate issued by Registrar of Birth/Death/Marriages.
20. It is certified that the applicant has not been/ been provided any financial assistance from the State Govt or any other source.
21. I hereby declare that the information furnished above is correct as per the original documents of the applicant. Hence, case is **recommended**.

Date :

Signature :

Office Seal :

Designation :