

PERSONAL APPLICATION CUM FINANCIAL CONDITION REPORT : MARRIAGE GRANT

(Only for Two Daughters/Widow of ESM upto Havildar)

PERSONAL APPLICATION

To,
The Secretary
Kendriya Sainik Board

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

Particulars of ESM

2. Name

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3. Service No

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 Rank

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4. Present Address

5. Dates (dd/mm/yy)
Enrolment

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 Discharge

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 Death

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(Strike out if not applicable)

6. **Reasons for discharge:** (As in Discharge Certificate)

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

8. Dependents of ESM
(a) Wife d) -----
(b) Mother e) -----
(c) Father f) -----

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

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10. Additional information if any (a) Mobile No _____ (b) email id _____

Financial Condition Report

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

(b) Monthly income for non pensioners (from other sources) Rs

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

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

Declaration

14. 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.

15. 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 ZSW OFFICER

16. 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.

17. It is certified that the applicant has not been/been provided any financial assistance from the State Govt or any other sources.

18. 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 :