<u>APPLICATION FOR LOAN/GRANT FROM INBA</u> (for use by serving Officer/Sailors)

1.	Name in full		Rank	P.No	_	
2.	Marital Status: Married/Single					
3.	Date		Date of Jo	-	Date of retirement/Rel	ease
4. mon			edit balance o	n the date of	application Rs.	_
5.	Parti	culars of previo	ous loan/grant	availed from	n INBA, if any:-	
Mon repa		Amount Pu	irpose Lo	oan/Grant	<u>Balance</u>	If,
<u>& Y</u>	<u>ear</u>		· · · · · · · · · · · · · · · · · · ·	<u>CBF</u>		date
6.		unt of loan/gra				
7.	Purp	ose of Loan / G	rant: Rs.			
8.	The	following partic	culars must be	furnished in	support of loan/grant:-	
	(i)	FOR MARR	<u>IAGE</u>			
	(a)	Specify marri	age of self, da	ughter or sis	ter	
	(b)	Date of birth	(attach co	ertificate)		
	(c)		ate of marriag cate from the ard)			

	(11)	FOR HOUSE REPAIRS						
	(a)	Complete address of the house						
	(b) (c)	Details of repairs required Is it for normal repair? If not state, specific cause of damage						
	(d) Date when damage occurred							
	 (e) In case for natural calamity, amount of assistance provided by state authority (f) Estimated cost of repair 							
	(g)	A certificate from competent authority in support						
	(iii)	For Higher Education						
		(a) Class in which admission sought (b) Whether payment seat or normal seat						
	(c) Amount of fees paid/to be paid(attach fee receipt/fee structure)							
9.	Give	Give particulars of dependent family members:-						
	<u>S.N</u>		<u>11</u>					
	<u>Age</u>	<u>Status</u>						
	_							
	_							
	_							
10. 11.	Bank	of documents in support of your application: k Details:						
	(i)	Name as per Bank Account						
		(ii) Name of the Bank						
		(iii) Branch address						
		(iv) IFS Code of the bank (v) Full SB A/c No.						
	(vi)	Attached a leaf of cancelled cheque? Yes/No						

CERTIFICATE

I certify that, to the best of my knowledge and belief, all the answers given are true. I also undertake that if, on investigation, any of the statement made by me in this application are found to be false, I will be liable to appropriate disciplinary action.

		Signature of the Ap	plicant
Date:		Name: Rank P. No	_
	II		
(6	a) Recommended for a Loan/Grant Equal Monthly Installments of		
	b) The date of expiry of engagements	: as per service record	ds
	(Sig	nature of the Comma	anding Officer)
		Name	
		Rank	
Offic	ce Stamp		
Date : NOTES	<u>:-</u>		
	Applications for loan/grants should be priate relevant authority such as:-	supported by a cer	tificate from the
	a) The CO/Officer-in-Charge b) The CO/Gram Panchavat/Revenue	- for Mar Officer - for Hou	riages Ise Repairs

2. Application for grant/loan for House Repairs(NC) damaged due to earth quake, cyclone etc. should be submitted within six months from the date of occurrence along with proof of such natural calamities, new paper cutting, copy of state gazette notification.

for Higher

College/University

Education

(c)

- 3. Application for loan for self/daughter/sister's marriage should be submitted within three months of dated of marriage.
- 4. If the certificate is in a regional language, English translation of the same should be attached.

Appendix 'B'

SPECIMEN PROPFORMA OF CERTIFICATE FOR DAUGHTER/SISTER/SELF MARRIAGE

For Sister/Daughter Marriage

	Certified	that	the	marriage	of	Kumari
	sister	/daughter d	of			
Name _			Rank	No	is c	lue to be
solemnize	ed on	She i	s	years of age a	and her dat	te of birth
as per re	cord is	·				
For Self	<u>Marriage</u>					
Ce	rtified that the	marriage of	f Name		F	lank
	P.No	is due t	o be solem	nized on	H	e is
	years of age	and his dat	e of birth a	s per record is _		years.
		Signa	ature			
		_		er-in-Charge)		
			Rank _			
			Designation	on		
		Date	:			

CERTIFICATE FOR HOUSE REPAIRS

	•	respect of Name Rank serving in the Indian Navy is correct to the best of m					
	vledge:-	Serving in the main wavy is confect to the best of in	· y				
(a)	a) Full Postal address of the House						
(b)	Name(s) of ow	ner(s) of the House					
(c)	Name & address of authority with whom the house is registered for purpose of house/property tax						
(d)	Relation of the owner(s) of the house with the applicant.						
(e)	Date of constr	uction of house					
(f)	Type of construction of the existing house (Pucca/Kuchcha)						
(g)	Details of repa	irs required:-					
		ecific cause of damage (i.e. nance/earthquake/fire &	_				
	(ii) Date of	occurrence					
		f notification by the local ation of natural calamity closed)					
Offic	e Seal	Signature: (Commanding Officer/ Gram Panchayat/ Revenue Officer)					

Date:

(On Non-Judicial stamp paper of appropriate value)

AFFIDAVIT

Danidant of	on/daughter of					
Resident of	as follows:					
1. I/we have no objection to assigning of interest in the insurance cover and survival benefits by my husband/father Name Rank						
	val Group Insurance Fund to Indian Naval obtaining a loan towards education of my					
	cept that in the payment of Insurance roup Insurance Fund the assignee, Indian hi will have priority over me/us.					
3. My/Our/date/dates of birth is/are (Strike off which	&respectively. never is not applicable)					
Place:	Signature 1					
Date:	2 Deponents					
I/We/Mr/Miss/Mrs Rank _ aforesaid solemnly affirm and say that above are correct to the best of my/our and nothing material has been conceal	knowledge and nothing is false therein					
Place: Date:	Signature 1 2 Deponents					
Witness 1(Name and address) 2	— 					
Seal Notary Public	Attested Notary Public Date:					
	Dutc.					

Note: In case of minor children, the 1^{st} witness could be father as the natural and legal guardian. The second witness could be maternal/ paternal Grand parents or the children's mother's sister/brother as a safeguard.

UNDERTAKING

1. l	Rank No
Undertake tha	in the event of my service being terminated at my request
or for any rea	son what-so-ever, before the recovery of loan from INBA is
fully effected	I hereby authorize the authorities namely the Logistics
Officer-in-Cha	ge/Release Centre/Naval Group Insurance Fund to recover
the entire loai	amount outstanding against me from the amount due to me
	account, retirement/terminal benefits and amount due in my
DSOP/AFPP Fu	nd/Naval Group Insurance Fund survival benefits.
2	ambalka wak ka aswasal khis da alawakian kili kha awasunk dua ƙwana
	ertake not to cancel this declaration till the amount due from
me has been	spaid in full.
	Signature
	Name
	Rank No.
Place:	Ships
Date:	
	II
	COUNTERSIGNED
	Commanding Officer/HOD
Ship's	INS
Stamp	Date:

Principal Director Non-Public Funds Directorate of Non-Public Funds IHQ of MoD (Navy) A-124, Sena Bhavan New Delhi – 110 011

PART - I APPLICATION FOR AWARD OF MERIT SCHOLARSHIP FROM INBA For Academic Year 2014 - 2015

1.	Category (Serving /Pensioner/Deceased).					
2.	Personal I	Particulars of father	mother			
	(a) Per	sonal Number		***************************************		
	(b) Nar	me (as per bank acco	unt)			
	(c) Rar	nk		-		
3.	Mobile No	*		email-id		
4.	Name of th	e Child.				
5.	Award (Fre	sh/Renewal).				
6	Ship/Estab	lishment/Unit.				
7.	Boarder(Hostler)or Day Scholar (attach Boarder/Hostel Certificate or Rent agreement/Rent receipts)					
8.	Details of la (a) (b) (c) (d) (e)	ast Qualifying Examir Name of course I Year of Examinat Marks Obtained Out of total Marks Percentage score	Passed ion			
9.	Details of p S.No. (i) (ii) (iii) (iv) (v)	crevious scholarship in Course	f any, received Year	***************************************	,	
10.	Present Course of Study (attach Bonafide Studentship Certificate).			·····		
11.	Whether Graduation/Post Graduation/ Vocational/Diploma Course.					
12.	If Vocational, Is the course recognised if yes, attach a copy of recognition.					

	2
13.	Duration of Course.
14.	Course commenced from (Month/Year).
15.	Name of the College/Institution.
16.	University to which affiliated.
	PART II
17.	In the cases of pensioners or deceased, furnish the following:- (i) Date of Joining Indian Navy (ii) Date of Retirement (iii) VSF Registration No (if not contact DESA Tel: 011-24121068/26880943 & internet link www.vsf-desa.com) (iv) In case of deceased:-
	(a) Date of Retirement (b) Date of Death (c) Name of NOK/Guardian (v) Full postal address of the applicant:-
18.	House No Village Post Office Tehsil Dist Pin(State) Contact No(eMail- id) Furnish particulars of all children in order of their seniority/age:-
	(attach a copy of Kindred Roll/Children particulars/discharge certificate), as applicable S.No. Name of the Child (i) Date of birth
	(ii)
	In case of only girl child in the famiy
	I, Certified that (Name of daughter) is the only child in my family as per my service records.
19.	Furnish particulars of bank account of Naval personnel/NOK (as applicable):- (i) Name as per bank account: (ii) Saving Bank A/c No (in full): (iii) Name of the bank: (iv) Address of the Branch: (v) IFS Code of the Bank:
	(vi) Attach a Leaf/copy of self cancelled cheque Certified that the particulars given in the application are correct and any false statement made by me will disqualify my ward for award of scholarship from INBA besides appropriate disciplinary action.
	(Signature of Parent/ Guardian)
Plac	ee:
Date	

PART III

(to be completed by Ship/Establishment/Unit/DSSA Boards/VSF)

Certified that the particulars of family and other statements in part I & II of the application form shown by the father/guardian of the child are correct.

		(Signature of the CO/PD/HO VSF or as applicable Name		
		Designation		
	Seal :			
Date:	INSTR	UCTIONS		
1.	All columns of the application form a	re to be completed in all resp	ects.	
2. must k	If the marks are expressed in grade pe furnished.	es, their equivalent in %age	duly certified by t	the principal
3. indicat	As the scholarship is restricted to fixed in the appropriate column of	rst two children only, particul oplication form.	lars of all childre	n should be
4. form.	The applicant is required to fill up de	tails of all children in appropri	ate column of the	e application
5. 01 No Applic	Applications are to be forwarded to vevery year. Documents/certificate ations received after the due date will	es, yet to be received may be	ch IHQ, MOD(Nav be forwarded at a	vy) latest by a later date.
6.	Application Forms can be downloa	aded from the following wel	sites.	
	(i) Service personnel (ii) Retired (iii) Forms download	link www.irfc-nausena.nic.in		
(i) (ii)	Attested copy of Marks sheet of 10+2 Attested copy of Marks sheet of last emic year) issued by college/Universitated.	2 qualifying examination (i.e bo	th semesters for heet will not be	Yes/No Yes/No
(iii) (iv) (v) (vi) (vii) (viii) (ix) (x) (xi) (xii)	Boarder/Hostel Certificate or Rent ag Bonafide Studentship Certificate Attested copy of P.P.O.(for retired ar Minimum entry qualification certificate Recognition certificate of diploma cor An attested copy of Children Particul Kindred roll (for serving sailors) Attested copy of Certificate of Service Attested copy of Service and Releas Leaf/ copy of a self cancelled cheque	nd deceased naval personnel) e (for diploma courses) urse. ars (for Serving officers) e (for retired/deceased officers	cers)	Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No Yes/No

IFS Code and account No

Principal Director Non-Public Funds Directorate of Non-Public Funds IHQ of MoD (Navy) A-124, Sena Bhavan New Delhi – 110 011

PART-I

APPLICATION FOR AWARD OF SCHOLARSHIP POST 10TH STANDARD (FOR PURSUING 11TH AND 12TH STANDARD)

(for daughter of serving officers and sailors, if she is the only child in the family)

				For Academic Year 2	014 - 2015
1.	Personal	Particulars of fathe			
	(a) Pe	rsonal Number		Part of the second second second second	
	(b) Na	me (as per bank ac	count)		
	(c) Ra	nk			
2.	Mobile No		-	email-id	
3.	Name of t	he Child.			
4.	Award (Fr	esh/Renewal).			
5.	Ship/Estat	blishment/Unit.			
6.	Details of	last Qualifying Exam	nination		
	(a) (b) (c) (d) (e) (at	Year of Examir Marks Obtained Out of total Ma	nation d rks ored	ination)	
7.	Details of	previous scholarship	p if any, received	in respect of above ward.	
	<u>S.No.</u> (i) (ii)	Course	Year	Amount	4.
8		Course of Study (atta hip Certificate).	ich Bonafide		
9.	Bank deta	nils	ach leaf/copy of self-cancelle	d cheque	

Certificate (a) I, Certified that (Name of date family as per my service records.	ughter) is the only child in my
(b) Certified that the particula statement made by me will disqua appropriate disciplinary action.	rs given in the application are correct and any false lify my ward for award of scholarship from INBA besides
Place:	(Signature of Parent/ Guardian)
Date:	
	PART II
(to be completed by	by Ship/Establishment/Unit)
Certified that the particulars of family anby the father/guardian of the child are cor	d other statements in part I of the application form shown rect.
	(Signature of the CO)
,	NameRank Designation
Office Seal	Designation
Place:	
Date:	UCTIONS
All columns of the application form :	are to be completed in all respects.
2. As the scholarship is restricted to indicated in the appropriate column of the a	first two children only, particulars of all children should be application form.
The applicant is required to fill up d form.	etails of all children in appropriate column of the application
 Applications are to be forwarded to Aug every year. Documents/certificate Applications received after the due date were 	Secretary INBA so as to reach IHQ, MOD(Navy) latest by tes, yet to be received may be forwarded at a later date. ill not be considered.
5. Application Forms can be download	paded from the following wefsites.
(a) ir&fc public domain (internet (i) Service personnel (ii) Retired (iii) Forms download) link www.irfc-nausena.nic.in (under the following heads)
	ttp: //159.12.123.1 (after that same as internet link)
CHECK LIST FOR DOCUMENTS ENCLO	SED
(i) Attested copy of Marks sheet of 10	^h /11 th class (as applicable). Downloaded Yes/No
result/mark sheet will not be accepted.	Yes/No
(ii) Bonafide Studentship Certificate(iii) An attested copy of Children Partic	
(iv) Kindred roll (for serving sailors)	Yes/No
(v) Leaf/ copy of a self cancelled chequires Code and account No	ue showing Name Yes/No

Principal Director Non-Public Funds Directorate of Non-Public Funds IHO of MoD (Navy) A-124, Sena Bhavan New Delhi – 110 011

APPLICATION FOR REIMBURSEMENT OF 33% OF COACHING FEE FOR ADMISSION TO IITs/NITs/IIS (BANGALORE)/ISM (DHANBAD) AND MBBS COURSES

(For Serving and Retired Naval Personnel (Pensioners) and widows

Cate	gory (Serving /Pensioner/Deceased)).
Pers	onal Particulars of father	
(a)	Personal Number	ACCOUNTS AND ADMINISTRATION OF THE PARTY OF
(b)	Name (as,per bank account)	(F)
(c)	Rank	
Mobi	le No	email-id
Ship/	Establishment	
Name	e of the child	
	ent Course of study ch a bonafied studentship certificate)	
	marks and % obtained in 10+2 ose attested copy of mark sheet)	
	e of the course for which ching is undertaken	
Coac	thing class attended at	
(i)	Name of the Institute	
(ii)	Address of the Institute	
(iii)	Contact No	
(iv)	Duration of the course with dates	
	unt of fee paid ch original fee receipt)	
	ils of any previous coaching oursement received from INBA	(a)
tellill	Dursement received from INBA	(h)

12.	(attacl	able.	order of their se ren particulars//	eniority/age:- /attested copy of discharge ce	rtificate), as
	S.No.	Name of the Child		<u>Date</u> <u>of</u> <u>birth</u>	
	(i) (ii) (iii) (iv)				
13.	Bank	details:-			
	(i)	Name as per bank account	:		
	(ii)	Saving Bank A/c No (in full)	:		
	(iii)	Name of the bank	:	-	
	(iv)	Address of the Branch	:		
	(v)	IFS Code of the Bank :			
	(vi)	Attach a copy of self cancelle	ed cheque.		
			II	(Officer/Sailor's Signat	ture)
		COUN	ITERSIGNED		
Offic	e Seal &		ANDING OFFIC Board/RSB/KSB		
CHE	CK LIST	FOR DOCUMENTS ENCLOS	SED		
(a)	Original	copy of coaching fee receipts	<u> </u>		Yes/No
(b)	Attested	copy of Marks sheet of 10+2			Yes/No
(c)		Studentship Certificate	l doooood no	al marsannal)	Yes/No
(d) (e)	An attest	copy of P.P.O.(for retired and ed copy of Children Particular	rs (for Serving	officers)	Yes/No Yes/No
(f))	Kindred	roll (for serving sailors)	o (lor ociving	officers)	Yes/No
(g)	Attested	copy of Certificate of Service	(for retired/de	ceased officers)	Yes/No
(h)	Attested	copy of Service and Release	Certificate (for	retired/deceased sailors)	Yes/No
		y of a self cancelled cheque seand account No	showing Name	<u> </u>	Yes/No
		of application to reach wit	hin two month	s of taking admission	
		ion Forms can be download			
	(aa)	ir&fc public domain (interne (i) Service personnel (i	t) link <u>www.irfc</u> i) Retired	<u>-nausena.nic.in</u> (under the folk I (iii) Forms download	,
	(ab)	NEWN(Navy-Intranet) link h	nttp://159.12.12	23.1 (after that same as interne	et link)

Principal Director Non-Public Funds Directorate of Non-Public Funds IHQ of MoD (Navy) A-124, Sena Bhavan New Delhi – 110 011

APPLICATION FOR REIMBURSEMENT OF COACHING FEE (For Serving Sailors only)

1,	Pers	sonal Particulars of	father				
	(a)	Personal Number	· M. C	(1) (1)		***************************************	_
	(b)	Name (as per bar	nk account)	-		***************************************	
	(c)	Rank		-		-	
2.	Mob	ile No		91	mail-id		man.
3.	Ship	/Establishment		197990000000000000000000000000000000000			7000
4.	Nam	e of the child				**********	
5.	Pres	ent Course of study					
6.		n last passed lose attested copy of	mark sheet)				
7.	Tota	l marks obtained & %	6age				
8.	%ag	e of PCM or PCB					
9.	Coad	ching undertaken for					
10.	Dura	tion of Coaching & E menced from)ate				
11	Coad	ching class attended	at				
	(i)	Name of the Insti	tute	-			
	(ii)	Address of the In	stitute	-			
	(iii)	Contact No	7/2	*************			
12.	Amo (attac	unt of fees paid ch original fee receip	t)	8			
13.	Detai reimk	ils of any previous co	paching from INRA	(a)			_
			Torri II torri	(b)			

		2		
14.	Furnish particulars of all c (attach a copy of Kindred	hildren in order of their seni Roll)	iority/age:-	
	S.No. Name of the Child (i) (ii)		Date of birth	
	(iii) (iv)	_		
15.	Bank details	Attach le	eaf/copy of self cancelled ch	eque
		II	(Sailor's Signature)	
		COUNTERSIGNED		
		COUNTERCIONED		
	,			
		COMMANDING OFFICE	R	
OF	FICE Seal & Date			
Note	e : Children studying in clas	ss XII or completed it earli	er are only eligible.	
CH	HECK LIST FOR DOCUMEN	TS ENCLOSED		
(b) (c) (d)	Original copy of coaching fe Attested copy of Marks shee Kindred roll Leaf/ copy of a self cancelle IFS Code and account No	et of 10 th /XII or graduation and cheque showing Name	as applicable	Yes/No Yes/No Yes/No Yes/No
(e)	Last date of application to	reach by 31 Aug 14.		
(f)	(i) Ser (ii) Reti (iii) For	in (internet) link <u>www.irfc-n</u> vice personnel ired ms download	owing wefsites. lausena.nic.in (under the fol	

APPLICATION FOR AWARD OF INCENTIVE FOR SPORTS CHILDREN OF SERVING NAVAL PERSONNEL

1. 2. 3. 4. 5. 6. 7. Posit	Name : Rank, & P.No. : Ship/Establishment Based at : Name of the Participant : Relationship with the applicant : Details of Participation S.No. ion	Name of Sport Period
	Level of Tournament : Organised/Sponsored by No. of Participants Position attained : If, International event, No. of : countries participated Details of Previous such S.No. ived awards received	Year Name of Sport Amount
14.	Furnish details of selection	<u> </u>
	procedure	
15.	Name of authority conducting	:
16.	selection Bank details:- (i) Name as per Bank Account: (ii) Name of the Bank (iii) Branch address (iv) IFS Code of the bank: (v) SB A/c No.: (vi) Have you attached a leaf of control of the selection of	
belief	Certified that above information is of and any wrong declaration can attri	correct to the best of my knowledge and act disciplinary action against me.
Place: Date:	: 	Signature Name Rank & No AND FORWARDED
		7.1.2.1.0.1.0.1.0.1.0.1.0.1.0.1.0.1.0.1.0
Place: Date:	(CO/HOD)	
	COUN	<u>TERSIGNED</u>
Place: Date:	(Administra	ative Authority)

REVISED APPLICATION FOR GRANT FOR MPHIL/PhD DEGREE (for Serving personnel only)

1.	Name	Rank	No
2.	E-mail Id	3. Mobile No	
4	Ship/Establishment	1	
5	Degree attained PhD/M Phil (Attach CTC of degree)	:	
6.	Course Details:-	Subject	
		(a) College	
7.	Bank Details:-:		cheque and latest Statement oth the documents should be
8.	How this qualification is useful for Navy:		
9.	Course done in your own accord or spon		
10	. If on own accord please attach a copy o	f permission letter given by I	NHQ/DOP for higher studies.
		Signature	100
		II.	
	COL	INTERSIGNED	

(All above information given above are correct to the best of my knowledge and belief)

COMMANDING OFFICER/HOD/OFFICER-IN-CHARGE

Appendix 'M'

APPLICATION FOR FINANCIAL ASSISTANCE FROM INBA FOR HANDICAPPED CHILDREN

1. 2. 3. 4. 5.	Name Rank Numb Ship/E Statio	oer Establishment			
6. 7 8.	Date (attac	of Joining of Retirement th CTC of PPO) red, Postal Address			
9. 10. 11. 12. 13. 14. 15. 16.	Natur (attac Prese Board Name Month (Attac Previo Period To Total	e of the child le of disability ch certificate from Medical Author int Course of study ler/Day scholar le of School and address only fees och CTC of fee receipts) ous reimbursement received d of present reimbursement of present claim Rs. details:- Name as per Account (ii) Name of Bank (iii) Branch addess IFS Code of the bank	From	To	
	conce	SB A/c No. Have you attached a leaf of cand Certified that to the best of my k cation are true and correct. I, und calment of information would mak ing recovery of payment.	knowledge and beliertake that false (declaration or	
		II COUNTERSI	 GNED	(Signature)	
Office	Seal			_	
		(CO/EXo/HO	D/Secy., DSSAB)	
Place Date:					

REQUEST-CUM-APPLICATION FOR FINANCIAL ASSISTANCE FROM INBA

Sir,

- 1. I Submit for the consideration of the Indian Naval Benevolent Association, a request for financial assistance in the form of a grant in order to meet an emergent requirement which I am presently not in a position to meet from my own resources.
- 2. Details of my financial status and nature of my requirement are submitted in Parts I and II of the application form.

	Yours faithfully
Place :	
Date :	

<u>Application form for Grant from INBA</u> (FOR USE BY EX-NAVAL PERSONNEL/THEIR DEPENDENTS)

PART-I

⊥.	Details of Retired/Deceased N	lavai Personnei
	(a) Name in Full	:
	(b) Rank	:
	(c) P. Number	:
	(d) Date of Commission/Enrolme	nt :
	(e) Date of Retirement/Discharge	e :
	(f) Date and cause of Disability/D	
	(g) Is Disability/Death occurred du or after retirement	
	(h) Physical Condition of the App	licant :
2.		ase of deceased Naval Personnel
	(when widow or children are t	<u>:he applicant)</u>
	(a) Name of NOK	:
	(b) Relationship with deceased	:
	(b) Age	:
	(c) Address	:
	(d) Quantum of Assistance	:
	(e) Nature of Requirement	:

3. Details of family/dependents:

<u>S.</u> Marit	<u>Name</u> tal <u>Monthly</u>	<u>Age Mal</u>	<u>e/</u>	Relation-	<u>Class</u>
<u>No.</u> Incor	_	<u>Female</u>	<u>Ship</u>	<u>Studying</u>	<u>Status</u>
i					
ii 					
iii iv					
vi					
		<u>PART - I</u>	<u>l</u>		
	PRESENT FIN	ANCIAL STA	TE OF AF	PLICANT	
4.	Monthly Income from a	II Sources			
	(a) Amount of Monthly Ser Pension including Relie		:		
	(b) Income from Business Activity, if any	/Commercial	:		
	(c) Income from rented Pr House/Farm etc.	operty	:		
	(d) If presently employed: (i) Name and Address		:		
					 _
	(ii) Capacity in which e	employed	: _		
	(iii) Total emoluments (including all allow		:		
5.	Previous Grants received f	rom INBA, if a	any:-		
	(i)) AmountRs	:		
	(ii	i) Purpose	:		

6.	Bank	details:-
	(i)	Name as per Bank Account
	(ii)	Name of the Bank
	(iii)	Branch address
	(iv)	IFS Code of the bank
	(v)	SB A/c No.(in full)
	(vi)	Have you attached a leaf of cancelled cheque? Yes/No
above		rify that to the best of my knowledge and belief all the answers given true and my application is in every way a genuine and bonafide one.
Place	:	Signature of Applicant
Date	:	
		<u>CAUTION</u>

Any wrong declaration or concealment of facts may adversely affect consideration of application and may debar you from any further assistance/financial help. In your own interest please fill details correctly.

CHECK LIST:

Kindly enclose certified true copy of the following certificate/documents as applicable.

- (i) Pension Pay Order
- (ii) Discharge Certificate
- (iii) Death Certificate of Pensioner
- (iv) Wedding card as proof for daughter marriage of deceased pensioner.
- (v) Bonafide Studentship Certificate for assistance for handicapped children.

The Principal Director Ex-Servicemen Affairs IHQ of MOD (Navy) attested 6th Floor, Chankaya Bhavan Chankaya Puri New Delhi – 110 021 Paste one passport size photograph of child duly

APPLICATION FORM - SPECIAL SCHOLARSHIP SCHEME FOR WARDS OF NAVAL PERSONNEL DIED IN SERVICE

PART - I

(a)	Personal Number	:		
(b)	Rank	:		
(c)	Name	:		
d)	Ship/Establishment last served	:		
e)	Date of Death	:		
f)	Date of Retirement	:		
g)	Name of present Guardian	:		
n)	Relationship with the child	:		
i)	Address of the Guardian	:		
	Village	:		
	Post Office	:		
	Tehsil	:		
	Distt.	:	Stat	:e
	Pin No.	:		
j)	Nearest branch of Syndicate	Bank :		
k)	Pension Payment Order No.	:		
	(attach copy duly attested)			
1)	Details of all children in orde	r of their	age:_	
	Sl.No. Name	<u>Rel</u>	<u>ationship</u>	Date of Birth
	(i)			
	(ii)			
	(iii)	-		
	(iv)			
า)	Rate of family Pension and c	hildren		
''	education allowance per mor			

<u>2-</u> <u>PART - II</u>

		<u>Particulars of Child</u>	
	(a)	Name	
	(b)	Sex Male/Female	
	(c)	Relationship	
	(d)	Date of Birth	
	(e)	Class passed & %age of marks	
		(attach attested copy of marks shee	rt)
	(f)	Present course of study	
		(attach bonafide studentship	
		certificate from the institution)	
	(g)	Year of admission	
	(h)	Duration of the course	
	(i)	Name of the institution	
	(j)	Board/university to which	
	()/	affiliated	
	(k)	Details of Expenditure per year :	
	(14)	(attach original receipt)	
		(i) Tuition fees	
		(ii) Books/Stationery	
		(iii) School Bus Fees	
		(iv) Other expenses	
		Total Rs.	
	(1)	If Hosteller, Amount of fees paid	
	(1)	(attach receipts)	
	(m)	Whether the child is in receipt of any	
	(111)	other scholarship/stipend or financia	
		assistance from any other source, if	
	(n)	yes, the amount received Bank details:-	
	(n)		
		(i) Name as per Bank Account	
		(ii) Name of the Bank	
		(iii) Branch address	
		(iv) IFS Code of the bank	
	(:\	(v) SB A/c No.	
		Have you attached a leaf of cancelle	
C 1 -		fied that, I have not applied/recei	
		e Govt., KSB/RSB or any other source	
		particulars are correct and any f	alse statement made by me will
rende	r me	ineligible for scholarship.	
		Cinnatura af the C	on a malta a
		Signature of the G	uardian
		Name	child
		Relationship with o	child
Date :			
Place	:		
-	C - !	PART - III	
1.		ool/College Attestation	
	certii	fied that the facts given in Part-II abo	ve are correct as per record.
		Cianatura of the	
		Signature of the _	ol/Institution
		neau oi tile SCN00	7//115ututi011

Stamp with date

DECLARATION-CUM-PRERECEIPT FOR SPECIAL SCHOLARSHIP SCHEME

1. New Rs	Received from the DES Delhi, (Rupees	A/Secretary Indian I a	Naval Benevolent Association, sum of only)
	the amount of scholarsh as detaile		ild from INBA for the academic
	Name of the child C	Course of Study	Institution
	I do solemnly declare th arship for the course of st	_	s not in receipt/claimed of any e from other source(s).
	l certify that the abovealed there from.	e information is co	orrect and nothing has been
Asso getti	ciation, Naval Headquarte	ers, New Delhi, if m o or granted other	cholarship to IN Benevolent by above child is found to be scholarship for the aforesaid
		Name Smt	
		W/O late Shri _	
		Rank	No
		Station	
Date_			
		COUNTERSIGNED	
		(CO/XO/Gazette Name Designati	dOfficer/SecyDSSA&B with ion and Seal)
Office	e Stamp		
Place	:		
Date	:		