GOVERNMENT OF GOA
DEPARTMENT OF ANIMAL HUSBANDRY & VETERINARY SERVICES PANAJI-GOA
(SPECIAL CALF REARING SCHEME)
REGISTRATION OF CALF

Application for Assistance for cross-bred female calf rearing one form to be utilized for one calf.
(To be filled in duplicate once only within 15 days of birth of calf)
1) Name of the beneficiary---------------------------------------------
2) Address
                                                                                     ----------------------------------------------
                                                                                     ----------------------------------------------
3) Educational Qualification--------------------------------------------
4) Name/ Identification of the cow (Dam)----------------------------
5) Breed -----------------------------------------------------------------
6) Date of A.I. with sires identification-------------------------------
7) Date of birth of calf -----------------------------------------------
8) Weight at birth of calf ---------------------------------------------
9) Identification of calf ---------------------------------------------

Signature of farmer

Certified that necessary entry had been made in my records and verified that no other member of family other than applicant as above is given the scheme.

Signature of V.A.

Registration No. ----------
Enclosed:

1) Certificate of A.I. if inseminated by any organization in Goa other than Department of AH & VS.