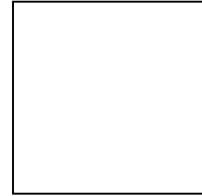


Appendix 'E'

REGISTRATION FORM-WIDOWS/WAR WIDOWS OF EX-SERVICEMEN

Name of applicant _____ Photo _____
Date of birth/Age _____
Address _____

Tehsil or Police Station _____



Tel _____

Service particulars of husband:

Name : _____ No. _____

Rank _____ Date of Birth _____

Date of Enrolment _____ Date of Death _____

Date of Discharge _____ Discharge Book No _____

PPO No. _____

Decoration _____ Regt/Corps _____

Death Details of husband :

War/Operation in which died _____

Attributable _____

Non-Attributable _____

After Retirement _____

Details of family (only dependent children upto 25 years and dependent parents of deceased Ex-servicemen)

<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Educational</u>	<u>Qualification</u>
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i)

ii)

iii)

iv)

Amount of family pension OrdinaryRs _____Special Rs _____

Liberalised special family pension Rs. _____

Lump sum Payment Received :

(By her & husband)

Gratuity Rs. _____ Group insurance

Rs. _____

Encashment of Leave Rs. _____ Financial Assistance

Rs. _____

Commuted Pension Rs. _____

Present occupation and monthly Income

Service Rs. _____ Business/Industry

Rs. _____

Agriculture Rs. _____

Unemployed _____

Other relevant Information, if any

Identification Mark:

Left Hand Thumb

Impression: _____

- 2 -

DECLARATION

I hereby declare that the particulars given above are true to the best of my knowledge and belief

Date: _____

Place: _____

(Signature of Applicant)

FOR OFFICE USE

Status as widow

Yes/No

Category:

War widow _____

Attributable _____

Non Attributable _____

After Retirement _____

Identity Card Issued to Late Ex-servicemen _____

No. & Date of identity Card Issued _____

Date: _____

Place: _____

RSB/ZSB

(Signature of Secretary

with Office stamp & date)