

**INTER - STATE MOVEMENT CELL  
GOA STATE DISASTER MANAGEMENT AUTHORITY**

(Application form for Registration of stranded Migrant Workers willing to return to their native place in compliance of Supreme Court of India, Suo Moto WP(c) 06/2020)

***(Registration Period from 11/06/2020 to 14/06/2020)***

***Transportation will be planned & undertaken by 22/06/2020***

- 1 Name of the Applicant :- \_\_\_\_\_
- 2 Mobile No :- 

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- 3 Age :- \_\_\_\_\_ Years
- 4 Gender :- \_\_\_\_\_
- 5 Aadhar Card No. (Optional) :- 

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- 6 Occupation :- \_\_\_\_\_
- 7 Details of the Employer  
Name :- \_\_\_\_\_  
:- Contact No:- \_\_\_\_\_  
Address of the Employer: \_\_\_\_\_
- 8 Residential address of applicant in State of Goa :- Village:- \_\_\_\_\_ Taluka:- \_\_\_\_\_  
District:- \_\_\_\_\_
- 9 Residential address of applicant in Native State :- State :- \_\_\_\_\_ Village:- \_\_\_\_\_  
District:- \_\_\_\_\_

**10. Details of Family Members to accompany**

Sr. No.	Name	Age	Relation with the applicant	Occupation (Optional)

**(Signature of the Applicant)**

\*Submitted at \_\_\_\_\_ (Name of the Receiving office)

Signature of Receiving Officer \_\_\_\_\_ Date:- \_\_\_\_\_