

**FRESH APPLICATION FORM FOR UNEMPLOYMENT ALLOWANCE
FOR THE DISABLED PERSONS DURING _____**

1. Name and address of the Applicant in full (Block letters) :
2. (a) Age :
(b) Sex :
3. Date of Birth :
4. Father/Mother's Name with full address :
5. Married/Unmarried :
6. Nature of Disabilities (medical certificate should be attached) :
7. Educational qualification (attested copies of certificates marksheet to be attached) :
8. Employment exchange Registration No. If any. :
9. Unemployment Certificate from Deputy Commissioner of the District concerned to be attached. :
10. Schedule Caste/Scheduled Tribes (certificate should be attached). :

Signature of the Candidate

Note :-

1. Only for those unemployed disabled person who have passed SSLC or equivalent examination and above.
2. Educated unemployed student/persons in the age group of 21 years to 32 years only will entitles under the scheme.
3. Annual Income of the Family.

**RENEWAL APPLICATION FORM FOR UNEMPLOYMENT ALLOWANCE
FOR THE DISABLED PERSONS DURING _____**

1. Name and address of the :
Applicant in full (Block letters)
2. (a) Date of Birth :
(b) Age :
(c) Sex :
3. Father/Mother/Husband's Name :
with full address.
4. Married/Unmarried :
5. Nature of Disabilities (Medical Certificate :
should be attached).
6. Educational Qualification (Attested copy of :
certificates, marksheet to be enclosed).
7. Employment Exchange Registration Number :
If any (attested copy should be attached).
8. Unemployment certificate from the Deputy :
Commissioner of the District concerned to
be attached).
9. Scheduled Caste/Scheduled Tribe Certificate :
should be attached.
10. Whether you have received any :
unemployment allowance in the previous
years from Social Welfare Department ?

Signature of Applicant