## FORM NO. XLV (See Rule 289) APPLICATION FOR MARRIAGE ASSISTANCE

1.	Name of applicant	Name of Student
2.	Address	Mate/Fenale
3.	Registration No.	CONTRACTOR AND
4.	Age and Date of birth	(b) Whether proof is attached
5.	Date of payment of 1 <sup>st</sup> subscription	
	Amount & Name of Bank and branch	Name of College & affiliated University/Board
6.	Date of payment of last subscription	
	Amount, Name of Bank and branch	Name & Year of Course
7.	Duration of membership	Date of admission to the course
8.	Is membership live	Age & Date of birth of the Student
9.	If application is for marriage of	Details of qualifying examination pussed
30	Son/Daughter	i betanna to same/
	(a) Whether husband or wife, a	Hoard/State
	Member of this Board	
	(b) If so, has she/he applied	Marks scored in the qualitying
	For the financial assistance	foiladina ka
	(c) Date of birth of the son/daughter	
28	Who is getting	Marks scores
	(d) Address of the bride or	
	Bridegroom of the son/daughter	aarka
1	(e) Date & No. of the marriage	(a) Name of parent of application
	(f) Date & No. of the certificate of	(b) Kegistration No.
	Marriage Name and address of the	(c) Date of payment of hest subscription
	Authority who issued the certificate	(d) Date of payment of last subscription
	(g) Have you applied for financial assis	
	for the marriage of any other son/	stance.
	daughter, if so, details of the same	a construction participation is a second participation in the second second p
3+ 1	aughter, if so, actails of the same	sections Rultaness The
10.	If application is for the marriage of self	
	(a) Name and address of husband/	: the river le boltog to?
	Bridegroom	ter and the ter and the set of the set
10	(b) Date & place of marriage	The facts mentioned grov.
d i	(c) No. & Date of Marriage certificate	
	Name of authority who issued the	and a short a share weapporty
	Certificate.	· · · · · · · · · · · · · · · · · · ·
11.	Are you in receipt of any financial	
	Assistance for the purpose from Govern	mont
	Of any other institution.	innent
	The above facts are true to the h	est of my knowledge and information.
		sest of my knowledge and information.
Place	Nume & Signature of the student	
	annear ann a'	

Date :

Name & Signature of the Applicant

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