



The Mandayam Srivaishnava Sabha (R)

Sri Yadugiri Yathiraja Mutt Building, #198, 11th Cross, Sampige Road, Malleswaram, Bangalore 560003

Website: www.mandayamsabha.in Email: secretary.mandayamsabha@gmail.com Tel: 080 41535970

APPLICATION FOR FINANCIAL AID

{Form A}

(Only for the Members of the Sabha and their children, incomplete application is liable for rejection)

Stamp
size
Photo

1. Name in Full:

2. Gender: M F 3. Gothram: 4. Family Name:

5. Date of Birth(DD/MM/YYYY): / / Sabha Membership No.:

6. Father's Name in full:

7. Mother's Name in full:

8. Address: Door No.: City:

Street: State:

Area: Pin:

9. Email: 10. Mobile No.:

11. Land Line No.:

12. a. Marital Status: Married Unmarried Widowed Divorced

b. Family Status: i. Number of Children: Male Female

ii. Number of Dependents: Male Female

c. Residential Status: You Stay.. Independent With Relative Relationship:
 Old age Home With Children

d. Financial Status: i. Pension per annum: Rs. ii. Any other Income: Rs.

iii. If Income is "NIL" provide supporters' Name:

Relationship: Mob./Tel.No.:

iv. If you are receiving Financial Aid from any other organisation, please provide details:

Organisation: Aid Amount:

v. Have you been receiving Financial Aid from the "Sabha"? If "YES"

From When <Date> Aid Amount:

NOTE: Please fill in all the columns.

Applicant's Signature

For Office Use Only:

Application Received Date:

Amount sanctioned:

If rejected reason:

Proposed by

Approved by

Received the Amount

Name & Signature of Proposer & Sanctioning Authority

Name & Signature of Applicant's

ANNEXURE

Declaration annexure to the application for Financial Aid:

DECLARATION

I _____ the undersigned declare hereby that my application for 'Financial Aid' is in order and the information provided by me is true to the best of my knowledge.

Signature of the Applicant/Beneficiary

Name:

Membership No.:

Date:

Declaration by the Proposer:

PROPOSAL

I _____ the undersigned Donor/Patron No. _____ declare hereby and propose _____ that his/her application is in order and declare and recommend his/her application for Endowment under the category 'Financial Aid'.

Signature of Proposer

Name

Membership No:

Date: