



FIIBM-10145/592

HINDUSTAN JAN KALYAN RASHTRIYA VIKAS SEWA SAMITI
ADMINISTRATIVE AUTONOMOUS ORGANIZATION
(ALL STATES OF INDIA)

&
MSME REGISTRATION FORM
Micro, Small & Medium Enterprises

Contribution of Material Form
वस्तु दान फॉर्म



S.NO. : RN/FIIBM/410/587/16

Someone is waiting for you hoping that you will help them. Your donation will help us provide food to a hungry person, education to a child, shelter to a destitute and treatment to a sick person./आप सहायता करेगे ये सोचकर कोई आपका इंतजार कर रहा है | आपका दान एक भूखे को रोटी, एक बच्चे को शिक्षा, एक निराश्रित को आश्रय, एक बीमार को इलाज उपलब्ध करवाने में हमारी मदद करेगा |

Personal Details :

Name of Donor : _____	Passport size Photograph Paste Here
Father's Name : _____	
Name of Mother : _____	
Mobile No : _____	
Email ID : _____	
Gender[Put Right Tick] : <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender	Signature of Applicant
Date of Birth : ____/____/____	
Pan No : _____	
Aadhar No. : _____	

Address for Communication

House No./ Bldg./ Apt: _____ Street/ Road/ Lane: _____

Landmark : _____ Area/ Locality/ Sector: _____

Village/ Town/ City: _____ Post Office: _____

State : _____ District : _____

City : _____ Pin Code : _____

Nationality : _____

Are you living on Rent? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you 18 years old? <input type="checkbox"/> YES <input type="checkbox"/> NO	Whether your Family annual income under 1,00000 Rs. <input type="checkbox"/> YES <input type="checkbox"/> NO
Whether you employed* <input type="checkbox"/> YES <input type="checkbox"/> NO	Whether Person with Disability* <input type="checkbox"/> YES <input type="checkbox"/> NO	Property Type <input type="checkbox"/> Rented <input type="checkbox"/> Owned
Whether the family owns any house anywhere in India <input type="checkbox"/> YES <input type="checkbox"/> NO		

<p>(A) Whether you have any one document listed below as Proof of residence [Put Right Tick]</p> <p>Ration Card Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Voter Id Card Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Passport Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Driving License Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Electricity Bill Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Water Bill Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Telephone Bill Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Gas connection receipt Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Bank Passbook Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Caste Certificate Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Property Documents Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>(C) Whether you have any one document listed below as Proof of Age [Put Right Tick]</p> <p>Birth Certificate Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>School Leaving Certificate Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Matriculation Certificate Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Driving License Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Passport Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Pan Card Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Ration Card Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Voter ID Card Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(B) Category [Put Right Tick]</p> <p><input type="checkbox"/> General <input type="checkbox"/> OBC <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> EWS</p> <p><input type="checkbox"/> Ex-Serviceman <input type="checkbox"/> Physically Challenged</p>	<p>(E) Religion [Put Right Tick]</p> <p><input type="checkbox"/> Hindu <input type="checkbox"/> Muslim <input type="checkbox"/> Sikh <input type="checkbox"/> Christian</p> <p><input type="checkbox"/> Jainism <input type="checkbox"/> Buddhism <input type="checkbox"/> Other</p> <p>(F) Employment Status</p> <p><input type="checkbox"/> Employed <input type="checkbox"/> Unemployed</p> <p><input type="checkbox"/> Self-Employed <input type="checkbox"/> House-wife</p> <p>(G) Marital Status</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Divorcee</p> <p><input type="checkbox"/> Widowed <input type="checkbox"/> Widower</p> <p>(D) Educational Qualification [Put Right Tick]</p> <p><input type="checkbox"/> Illiterate <input type="checkbox"/> Below 10th Grade</p> <p><input type="checkbox"/> 10th Passed <input type="checkbox"/> 12th Passed</p> <p><input type="checkbox"/> Graduation <input type="checkbox"/> Post-Graduation</p> <p><input type="checkbox"/> Ph.D.</p>
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दान संबंधी वस्तु का विवरण
CHARITY ARTICLE OR ITEM DESCRIPTION

Self Declaration*

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the verification, my application is liable to be cancelled as per the provisions of the SAMITI Act, 2023 and, Regulations framed there under and other applicable Acts and Rules, etc. I hereby state that the facts mentioned above are true to the best of my knowledge and belief.

Date* : _____

Place* : _____



Signature of Applicant
[Declarant*]

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(POSTAL ADDRESS)

Send complete filled Contribution of Material Form to **The Director Hindustan Jan Kalyan Rashtriya Vikas Sewa Samiti, Plot No-1488, Parliament Street, Hanuman Road Area, New Delhi, Delhi-110001, Ph. No.: 011-71468315, 011-71468316; Fax No. 011-71468315, Email ID : info@hindustanwelfare.com; contact@hindustanwelfare.com** alongwith the following documents by Registered Post:

1. Aadhar Card **[Self Attested]**
2. Pan Card **[Self Attested]**
3. Voter ID Card **[Self Attested]**
4. Two Passport Size Photograph
5. Make a list of Donating/contributing Material on Plain Paper.

(A) NOTE : Our supporting Team will contact you soon. You will be informed about your Application Status through letter/SME/Email/Telephonic Call".
(B) NOTE : Different States provide their natives different plan according to the following by its Govt. rules.

Do not write anything below the page