ANNEXURE - A

FORM OF APPLICATION FOR ECONOMICALLY WEAKER SECTIONS (EWS) CERTIFICATE

То						_		
The Sub-Divisional Officer / District	Welfare	Officer, Kolkata.					and and the same	
Sir,		Addisonne					10000000	
I do hereby apply for Ec which particulars are given below. and if anything found contrary I wo	I hereby i	undertake that the info	WS) Certi rmation i	ificate in the s correct to	e following prescribed the best of my knowle	proforma, for edge and belief	AND	
				Your	s faithfully,		The Street of th	
Date:		(Sign	ature of a	applicant / g	uardian in case of min	or)		
1. Full Name of Applicant :								
2. Father's /Husband's Name:								
3. Name of Caste :								
4. (a) Date of Birth :								
(b) Place of Birth :								
Village / Ward		Police Station		District		State		
						Special and the second		
	CI PARTE	we applicance (i				The state of the s		
5. Address since Birth :						SOLUTION SECTIONS	Land I cale & Tal.	
(a) Present Address :	E TE PAY	Machine Man						
Para / House No. / Road / Vil	lage	Ward No. / G.P.	Po	st Office	District	State	Pin	
						1		
(b) Other Address(s) :					1			
Para / House No. / Road / Village		Ward No. / G.P.	Post 0	ffice	District	State	Pin	
							e propiesti i	
6. Nationality :	7. R	eligion :	8. Se	ex:				
9. Details of two (2) referees :								
Name of 1st referee	Name of 1st referee Address of 1st referee			Name of 2	nd referee	Address of 2nd	Address of 2nd referee	
					14-14-1-1-1-1-1			
	vi assia					professional	et salar di	
10. Whether the applicant or his fam	ily migrat	ed from other State / C	ountry?:			1-12-10		
11. If point no. 10 is 'Yes' :								
Migration Certificate No. :		Date of Issue :						
Address in his/her State of origin :								
Village / Ward	Polic	e Station	Distri	ct	State	Country	Year	

12. INCOME AND ASSET DETAILS: Service Details of Mother : A. Service Details of Father : Type of Organisation Type of Organisation Name of the Organisation Name of the Organisation Designation Designation Age Age Date of Appointment Date of Appointment Service Details of Spouse : Service Details of Self Type of Organisation Type of Organisation Name of the Organisation Name of the Organisation Designation Designation Age Age Date of Appointment Date of Appointment B. Agriculture Land Holding: Owned by self, spouse, mother, father & minor children ii) Size of holding in acres: i) Location Income / Wealth of Mother: C. Income / Wealth of Father: i) Annual income from Salary: i) Annual income from Salary : ii) Annual income from other sources: ii) Annual income from other sources: iii) Whether Tax Payer iii) Whether Tax Payer : Yes/No (If yes, a copy of the last 3 (three) (If yes, a copy of the last 3 (three) years return be furnished) years return be furnished) : Yes/No iii) Whether Tax Payer iii) Whether Tax Payer : Yes/No (If yes, a copy of the last 3 (three) years (If yes, a copy of the last 3 (three) years return be furnished): return be furnished): iv) Whether covered in Wealth Tax Act : Yes/No iv) Whether covered in Wealth Tax Act :Yes/No (if so furnish details) (if so furnish details) Income / Wealth of Spouse: C. Income / Wealth of Self: i) Annual income from Salary: i) Annual income from Salary : ii) Annual income from other sources: ii) Annual income from other sources: iii) Whether Tax Payer : Yes/No iii) Whether Tax Payer : Yes/No (If yes, a copy of the last 3 (three) (If yes, a copy of the last 3 (three) years return be furnished) years return be furnished) iii) Whether Tax Payer : Yes/No : Yes/No iii) Whether Tax Payer (If yes, a copy of the last 3 (three) years (If yes, a copy of the last 3 (three) years return be furnished): return be furnished): iv) Whether covered in Wealth Tax Act :Yes/No iv) Whether covered in Wealth Tax Act: Yes/No (if so furnish details) (if so furnish details)

3 List of documents submitted	
3. List of documents submitted	
fwo recent colour passport size photograph.	
i)	
ii)	
v)	
v)	
vi)	
vii)	
Date:	(Signature of applicant / guardian in case of minor)
	(Signature of applicant / guardian in case of minor) Acknowledgement Slip
	Acknowledgement Slip
Application No. : Name :	••••••
Application No. : Name : Father's Name :	Acknowledgement Slip Date :
Application No. : Name : Father's Name : Applied for : Income & Asset Certificat	Acknowledgement Slip
Application No. : Name : Father's Name : Applied for : Income & Asset Certificat N.B. i. Please use application No. for further reference.	Acknowledgement Slip Date : e for Economically Backward Society(EWS) ed B.D.O. / S.D.O. office on 2nd or 4th Wednesday of any month within next 60 days between