GOVERNMENT OF MANIPUR DIRECTORATE OF TRIBAL AFFAIRS& HILLS

APPLICATION FORM FOR SEWING MACHINE SCHEME

For the Financial Year: 2020-2021

1. Name of the applicant:

2. Phone:

4. AADHAR No:

3. Age:

(Please read the application form carefully and fill up in BLOCK LETTERS only. Avoid overwriting in the application form. One Applicant should apply for one Scheme during a year)

APPLICANT'S

PHOTO

5.	Adult member (s) of the household:											
	Sl.No	Name (s)	Age	AADHAR No.								
	i											
	ii											
	iii											
	iv											
	V											
	vi											
	vii											
	viii											
	ix											
	Х											
6.	Address:											
•	(i)	Name of the village:										
	(ii)	Block:										
	(iii)											
	(iv)	· •										
7.	Total family income per year (in Rs.):											
	(Income Certificate to be enclosed issued by DC/SDO/SDC)											
8.		of the Tribe:										
9.	Occupation of the applicant (Please tick the correct one \checkmark)											
	Cultiv	ator/Farmer										
	Self E	mployed (Please specify)										
	Emplo	oyed in Govt. Department (Please specify										
	post)											
	Employed in Private Company/Organization											
	(please specify post)											
	Others (Please specify)											

10.	Whether	any	request	for	availing	the	Scheme	applied	for	has	been	put	up	at	Meeyamgi
	Numit/Hi	ll Lea	ider's Da	y/Go	to Villag	je. If	so, encl	ose copy	of t	he a _l	pplicat	ion.			

DECLARATION

I do hereby solemnly declare that the above information furnished by me are true to the best
of my knowledge and at any point of time if any part or whole information is found to be
incorrect, my candidature may be cancelled and I am liable to be prosecuted under Section
420 & 468 and any other relevant provisions of the Indian Penal Code or any applicable law
for the time being in force. I append my signature/thumb impression having understood the
above provisions.

Date:	
Place:	

Signature/Thumb impression of the applicant