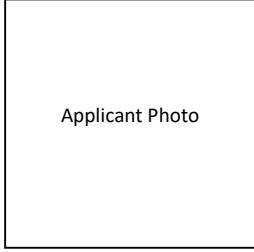


ANNEXURE - A
GOVERNMENT OF TELANGANA – AASARA PENSION SCHEME
APPLICATION FOR SANCTION OF NEW OLD AGE PENSION

District	<input type="text"/>	
Mandal /Municipality	<input type="text"/>	
Gram Panchayat / Ward No.	<input type="text"/>	
Habitation / Street	<input type="text"/>	
1. Applicant Full Name (As shown in Aadhar)	<input type="text"/>	
2. Aadhar Number	<input type="text"/>	
3. Father's/Husband's Name	<input type="text"/>	
4. Address	<input type="text"/>	
5. Date of Birth (as per Aadhar)	<input type="text"/>	Age <input type="text"/>
6. Gender	<input type="text"/> Male <input type="text"/> / <input type="text"/> Female	
7. Social Category	<input type="text"/> SC / ST / BC / Minority / Others	
8. Bank Account No.	<input type="text"/>	IFSC Code <input type="text"/>
Bank Branch	<input type="text"/>	Mobile No <input type="text"/>

Documents enclosed: Aadhar Card Xerox Copy

Declaration : I hereby declare that all particulars stated are true to the best of my knowledge and belief , and no material information has been concealed or misstated. I further state that if any inaccuracy is detected in the application, I shall be liable to forfeiture of any benefits derived and other action as per law.

Signature/Thumb Impression of the Applicant