

**Form****Application for marriage grant to Men/Women under Mukhya Mantri Sukh Aashray Yojna**  
**(To be submitted 6 months in advance or after 6 months of marriage) (Once in life time)**

1. Name of applicant \_\_\_\_\_
2. Father's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian's Name \_\_\_\_\_
5. Permanent Home Address of applicant  
 Village \_\_\_\_\_ Post Office \_\_\_\_\_ PinCode \_\_\_\_\_  
 Panchayat \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Name of branch \_\_\_\_\_
9. IFSC code & \_\_\_\_\_
10. Account No. (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Name, and address of person with whom, the applicant is being married.  
 Name \_\_\_\_\_ S/o, D/o Sh/Smt. \_\_\_\_\_  
 Village \_\_\_\_\_ Post Office \_\_\_\_\_ Pin Code \_\_\_\_\_  
 Panchayat \_\_\_\_\_ Tehsil. \_\_\_\_\_ District \_\_\_\_\_
13. Date of Birth of boy/girl with whom, the applicant is being married \_\_\_\_\_
14. Aadhar Number of proposed spouse \_\_\_\_\_
15. Age of applicant at the time of marriage \_\_\_\_\_
16. Age of proposed spouse at the time of marriage \_\_\_\_\_
17. Proposed date of marriage \_\_\_\_\_
18. Amount of assistance required:- \_\_\_\_\_

Photograph

Signature of the Applicant

Date:-

Correspondence Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter /son/wife of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Tehsil \_\_\_\_\_ District \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no facts have been concealed. I  
also declare that I have not/will not avail the grant under Mukhyamantri Kanyadan  
Yojna or any other scheme of similar nature for this period for the purpose of  
Marriage.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of girl & boy (applicant & proposed spouse).
  2. Death Certificate of Father & Mother.
  3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
  4. Certificate form CWC regarding declaration of abandoned /surrendered child.
  5. Copy of Aadhar of applicant and proposed spouse.
  6. Himachali Bonafide certificate of applicant issued by competent officer.
- Or
- Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. Certificate to the effect that the applicant is a resident of the Child Care Institution /After Care Institution of the state (to be issued by DCPO & counter signed by DPO).
  8. BPL Certificate (if any)
  9. Copy of bank account pass book of the applicant.
  10. Proof of marriage (counter signed by DPO concerned)

or

Certificate of proposed date of marriage issued by Secretary/ executive Officer of Gram Panchayat/ Nagar Panchayat/ Nagar Parishad/Municipal Corporation/ Council.

**Certification by the Gram Panchayat/M.C.**

It is certified that Sh./Smt./Ku. \_\_\_\_\_  
daughter/son/wife of Sh/Smt. \_\_\_\_\_ Village \_\_\_\_\_  
Post-Office \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_ (H.P.) in the  
resident of the above mentioned address \_\_\_\_\_ and that his/her marriage has been  
fixed on dated \_\_\_\_\_.

Signature

Secretary/ Executive Officer

Gram Panchayat/Nagar Panchayat/  
Nagar Parishad/ M.C

(Stamp)

**Verification report**

Certified that particulars given in the application form submitted by  
Sh./Smt./Ku. \_\_\_\_\_ daughter/son/wife of Sh/Smt. \_\_\_\_\_  
Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_  
Distt. \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the  
scheme. Hence recommended for sanction of marriage grant under the Mukhya Mantri Sukh  
Aashray Yojna Scheme. It is also verified that the applicant has not availed/applied earlier for  
the marriage grant under Mukhya Mantri Sukh Aashray Yojna/ Mukhyamantri Kanyadan Yojna  
or any other scheme of similar nature of this Department.

District Child Protection Officer  
(Stamp)

Signature of District Programme Officer  
(Stamp)

**Form****Application for Coaching grant under Mukhya Mantri Sukh Aashray Yojna**

Photograph

1. Name of applicant \_\_\_\_\_
2. Father’s Name \_\_\_\_\_ (Death of Death) \_\_\_\_\_
3. Mother’s Name \_\_\_\_\_ (Death of Death) \_\_\_\_\_
4. Guardian’s Name \_\_\_\_\_
5. Permanent Home Address of applicant  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Pin Code \_\_\_\_\_ Panchayat \_\_\_\_\_ Teh. \_\_\_\_\_ Distt. \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Branch Name \_\_\_\_\_
9. IFSC Code \_\_\_\_\_
10. Account Number (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Existing Educational Qualification \_\_\_\_\_

Sr. No.	Class	Name of Board/ University	Year of Passing the examination	Marks obtained/ Total Marks	Percentage

13. Name of the course into which coaching is to be pursued \_\_\_\_\_
14. Duration of the Course \_\_\_\_\_
15. Total expenditure of the course including:
  - 15.(i) Tuition fee of the course \_\_\_\_\_
  - 15.(ii) Hostel Charges (if any) \_\_\_\_\_
  - 15.(iii) Mess charges (if any) \_\_\_\_\_
  - 15.(iv) Any other charges. \_\_\_\_\_
16. Name, and address of the institute into which coaching is to be pursued  
Name of the Institute \_\_\_\_\_  
  
Address of the Institute \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of the Applicant

Date:-

Correspondence Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter/son of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Tehsil \_\_\_\_\_ District \_\_\_\_\_ (H.P.) solemnly affirm that all the particulars given in the application form true and no fact has been concealed. I also declare that I have not/will not avail the grant under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature for this period for the purpose of coaching.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death certificate of father and mother.
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Aadhar Card.
6. Himachali Bonafide certificate of applicant issued by competent officer.  
Or  
Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. BPL Certificate (if any)
8. Copy of bank account pass book of the applicant.
9. Certificate of existing educational qualification.
10. Admission certificate of the coaching institute.
11. Copy of fees structure of the course.

## Verification report

Certified that particulars given in the application form submitted by  
Sh./Smt./Ku. \_\_\_\_\_ daughter/ son of Sh. /Smt.  
\_\_\_\_\_ Village \_\_\_\_\_ Post-  
office \_\_\_\_\_ Tehsil \_\_\_\_\_

Distt. \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the scheme. Hence recommended for sanction of coaching grant under Mukhya Mantri Sukh Aashray Yojna. It is also verified that the applicant has not availed/applied for the coaching grant under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature of this Department for this period for the purpose of coaching grant.

Date:-

Signature of District Programme Officer/  
(Stamp)

**Form****Application for Higher Education (Academic) under Mukhya Mantri Sukh Aashray Yojna**

1. Name of applicant \_\_\_\_\_
2. Father's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian's Name \_\_\_\_\_
5. Permanent Home Address of applicant  
Vill. \_\_\_\_\_ PO. \_\_\_\_\_ Pin Code \_\_\_\_\_  
Panchayat \_\_\_\_\_ Teh. \_\_\_\_\_ Distt. \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Branch Name \_\_\_\_\_
9. IFSC code \_\_\_\_\_
10. Account number (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Educational Qualification \_\_\_\_\_

Photograph

Sr. No.	Class	Name of Board/ University	Year of Passing the examination	Marks obtained/ Total Marks	Percentage

13. Name and address of the institute into which admission to be pursued for Higher Education (Academic).

13 (i) Name of the Institute \_\_\_\_\_

13 (ii) Address of the Institute \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Name of the course into which admission to be pursued \_\_\_\_\_

15. Duration of the Course \_\_\_\_\_

16. Total expenditure of the course including :



16(i) Tuition fee of the course \_\_\_\_\_

16(ii) Hostel Charges (if any) \_\_\_\_\_

16(iii) Mess charges (if any) \_\_\_\_\_

16(iv) any other charges. \_\_\_\_\_

Signature of the Applicant

Date:-

Correspondence Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter/son of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Teh. \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no fact has been concealed. I  
also declare that I have not/will not avail the grant under Mukhya Mantri Sukh  
Aashray Yojna or any other scheme of similar nature for this period for the purpose  
of Higher Education (Academic).

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death certificate of father and mother (Copy of panchyat parivar register).
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Aadhar Card.
6. Himachali Bonafide certificate of applicant issued by competent officer.

Or

Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.

7. BPL Certificate (if any)
8. Copy of bank account pass book of the applicant depicting Bank Name, Branch, IFSC Code & Account Number.
9. Certificate of existing educational qualification.
10. Admission certificate to the Institute, where the applied course is to be pursued.
11. Copy of fees structure of the course, as specified by the Institute.

### **Certification by the Superintendent of the Concerned Child Care Institution in case if the applicant is ex resident of Child Care Institution.**

It is certified that Sh./Ku. \_\_\_\_\_  
daughter/son of Sh/Smt. \_\_\_\_\_ Village \_\_\_\_\_  
Post-Office \_\_\_\_\_ Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) is the ex-resident  
of the \_\_\_\_\_ Child Care Institution.

Signature  
District Child Protection Officer  
(Stamp)

Signature  
In-charge/ Superintendent  
(Stamp)

**Verification report**

Certified that particulars given in the application form submitted by Sh./Smt./Ku. \_\_\_\_\_ daugther/ son of Sh /Smt. \_\_\_\_\_  
Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_  
District \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the scheme. Hence recommended for sanction of grant for Higher Education under Mukhya Mantri Sukh Aashray Yojna. It is also verified that the applicant has not availed/applied for the grant under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature of this Department previously for this period for the purpose of Higher Education (Academic).

Date:-

Signature of District Programme Officer/  
(Stamp)

**Form****Application for Vocational Training under Mukhya Mantri Sukh Ashray Yojna**

1. Name of applicant \_\_\_\_\_
2. Father’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian’s Name \_\_\_\_\_
5. Permanent Home Address of applicant  
Vill. \_\_\_\_\_ PO. \_\_\_\_\_ Pin Code \_\_\_\_\_  
Panchayat \_\_\_\_\_ Teh. \_\_\_\_\_ Distt. \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Branch Name \_\_\_\_\_
9. IFSC Code \_\_\_\_\_
10. Account Number (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Educational Qualification \_\_\_\_\_

Photograph

Sr. No.	Class	Name of Board/ University	Year of Passing the examination	Marks obtained/ Total Marks	Percentage

13. Name and address of the institute into which admission to be pursued for Vocational Training.

13(i) Name of the Institute \_\_\_\_\_

13(ii) Address of the Institute \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Name of the course into which admission to be pursued \_\_\_\_\_

15. Duration of the Course \_\_\_\_\_

16. Total expenditure of the course including hostel fees, tuition fees etc. \_\_\_\_\_

16(i) Tuition fee of the course \_\_\_\_\_

16(ii) Hostel Charges (if any) \_\_\_\_\_

16(iii) Mess charges (if any) \_\_\_\_\_

16(iv) Any other charges \_\_\_\_\_

Signature of the Applicant

Date:-

Correspondence Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter/son of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Teh. \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no fact has been concealed. I  
also declare that I have not/will not avail the grant under Mukhya Mantri Sukh  
Aashray Yojna or any other scheme of similar nature for this period for the purpose  
of Vocational Training.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death certificate of father and mother (copy of panchyat parivar register).
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Aadhar Card.
6. Himachali Bonafide certificate of applicant issued by competent officer.  
Or  
Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. BPL Certificate (if any)
8. Copy of bank account pass book of the applicant depicting Bank Name, Branch, IFSC Code & Account Number.
9. Certificate of existing educational qualification.
10. Admission certificate to the Institute, where the applied course is to be pursued.
11. Copy of fees structure of the course, as specified by the Institute.

### **Certification by the Superintendent of the Concerned Child Care Institution in case if the applicant is ex resident of Child Care Institution.**

It is certified that Sh.//Ku. \_\_\_\_\_  
daughter/son of Sh/Smt. \_\_\_\_\_ Village \_\_\_\_\_  
Post-Office \_\_\_\_\_ Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) is the ex-resident  
of the \_\_\_\_\_ Child Care Institution.

Signature  
District Child Protection Officer  
(Stamp)

Signature  
In-charge/ Superintendent  
(Stamp)

**Verification report**

Certified that particulars given in the application form submitted by Sh./Smt./Ku. \_\_\_\_\_ daughter/ son of Sh /Smt. \_\_\_\_\_  
Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_  
District \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the scheme. Hence recommended for sanction of grant for Vocational Training under Mukhya Mantri Sukh Aashray Yojna. It is also verified that the applicant has not availed/applied for the grant under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature of this Department previously for this period for the purpose of Vocational Training.

Date:-

Signature of District Programme Officer/  
(Stamp)

**Form****Application for Skill Development under Mukhya Mantri Sukh Aashray Yojna**

1. Name of applicant \_\_\_\_\_
2. Father's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother's Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian's Name \_\_\_\_\_
5. Permanent Home Address of applicant  
Vill. \_\_\_\_\_ PO. \_\_\_\_\_ Pin Code \_\_\_\_\_  
Panchayat \_\_\_\_\_ Teh. \_\_\_\_\_ Distt. \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Branch Name \_\_\_\_\_
9. IFSC code \_\_\_\_\_
10. Account number (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Educational Qualification \_\_\_\_\_

Photograph

Sr. No.	Class	Name of Board/ University	Year of Passing the examination	Marks obtained/ Total Marks	Percentage

13. Name, and address of the institute into which admission to be pursued for Skill Development

13 (i) Name of the Institute \_\_\_\_\_

13 (ii) Address of the Institute \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Name of the course into which admission to be pursued \_\_\_\_\_

15. Duration of the Course \_\_\_\_\_

16. Total expenditure of the course including hostel fees, tuition fees etc. \_\_\_\_\_

16(i) Tuition fee of the course \_\_\_\_\_



16(ii) Hostel Charges (if any)\_\_\_\_\_

16(iii) Mess charges (if any)\_\_\_\_\_

16 (iv) Any other Charges\_\_\_\_\_

Signature of the Applicant

Date:-

Correspondence Address\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter/son of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Teh. \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no fact has been concealed. I  
also declare that I have not/will not avail the grant under Mukhya Mantri Sukh  
Aashray Yojna or any other scheme of similar nature for this period for the purpose  
of Skill Development.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death certificate of father and mother (copy of panchyat parivar register).
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Aadhar card.
6. Himachali Bonafide certificate of applicant issued by competent officer.  
Or  
Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. BPL Certificate (if any)
8. Copy of bank account pass book of the applicant depicting Bank Name, Branch, IFSC Code & Account Number.
9. Certificate of existing educational qualification.
10. Admission certificate to the Institute, where the applied course is to be pursued.
11. Copy of fees structure of the course, as specified by the Institute.

### **Certification by the Superintendent of the Concerned Child Care Institution in case if the applicant is ex resident of Child Care Institution.**

It is certified that Sh.//Ku. \_\_\_\_\_  
daughter/son of Sh/Smt. \_\_\_\_\_  
Village \_\_\_\_\_ Post-Office \_\_\_\_\_  
Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) is the ex-resident  
of the \_\_\_\_\_ Child Care Institution.

Signature  
District Child Protection Officer  
(Stamp)

Signature  
In-charge/ Superintendent  
(Stamp)

### **Verification report**

Certified that particulars given in the application form submitted by Sh./Smt./Ku. \_\_\_\_\_ daugther/ son of Sh /Smt. \_\_\_\_\_  
Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_  
District \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the scheme. Hence recommended for sanction of grant for Skill Development under Mukhya Mantri Sukh Aashray Yojna. It is also verified that the applicant has not availed/applied for the grant under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature of this Department previously for this period for the purpose of Skill Development.

Date:-

Signature of District Programme Officer/  
(Stamp)

**Form****Application for grant for micro enterprises/ small scale industry under Mukhya Mantri Sukh Aashray Yojna (once in life time)**

Photograph

1. Name of applicant \_\_\_\_\_
2. Father’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian’s Name \_\_\_\_\_
5. Permanent Home Address of applicant \_\_\_\_\_
6. Village \_\_\_\_\_ Post Office \_\_\_\_\_ Pin Code \_\_\_\_\_  
Panchayat \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_
7. Date of birth of the applicant \_\_\_\_\_
8. Aadhar No. \_\_\_\_\_
9. Bank Detail of applicant; Name of branch \_\_\_\_\_
10. IFSC code & \_\_\_\_\_
11. Account no (Aadhar seeded) \_\_\_\_\_
12. BPL Number (if any) \_\_\_\_\_
13. Existing Educational Qualification \_\_\_\_\_
14. A short description/Detailed Project Report (DPR) of the macro enterprises & small scale industry/ self employment unit proposed to be set up (attach proposal)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. Proposed place/ location of the project \_\_\_\_\_  
(copy of land/ revenue papers to be attached)
16. Total Estimate of the project \_\_\_\_\_
17. Amount required \_\_\_\_\_

Signature of the Applicant

Date:-

## Declaration

I \_\_\_\_\_ daughter /son/wife of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Tehsil \_\_\_\_\_ District \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no fact has been concealed. I  
also declare that I have not/will not avail the grant for startup under micro enterprises/  
small scale industry under Mukhya Mantri Sukh Aashray Yojna or any other scheme  
of similar nature, of the Department of SJ&E.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death Certificate of Father & Mother.
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Adhar card.
6. Himachali Bonafide certificate of applicant issued by competent revenue officer.  
Or  
Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. Certificate to the effect that the applicant is a resident of the Child Care Institution /After Care Institution of the state (to be issued by DCPO & counter signed by DPO).
8. BPL Certificate (if any)
9. Copy of bank account pass book of the applicant.
10. Proposal for small scale/micro scale industry
11. Copy of revenue papers of the land on which the project is proposed to be set up (Jamabandi & Tatima).
12. Estimate of the project.

**Verification report**

Certified that particulars given in the application form submitted by Sh./Smt./Ku. \_\_\_\_\_ daughter/son/wife of Sh/Smt. \_\_\_\_\_ Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_ Dist. \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the Mukhya Mantri Sukh Aashray yojna. Hence recommended for sanction of grant for small/micro scale industry under the Mukhya Mantri Sukh Aashray Yojna Scheme. It is also verified that the applicant has not availed/applied for any other scheme of similar nature of this Department.

District Child Protection Officer  
(Stamp)

Signature of District Programme Officer  
(Stamp)

**Form****Application for grant for construction of House under Mukhya Mantri Sukh Aashray Yojna**

1. Name of applicant \_\_\_\_\_
2. Father’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
3. Mother’s Name \_\_\_\_\_ Date of Death \_\_\_\_\_
4. Guardian’s Name \_\_\_\_\_
5. Permanent Home Address of applicant  
Village \_\_\_\_\_ Post Office \_\_\_\_\_ Pin \_\_\_\_\_  
Code \_\_\_\_\_
- Panchayat \_\_\_\_\_ Tehsil \_\_\_\_\_ District \_\_\_\_\_
6. Date of birth of the applicant \_\_\_\_\_
7. Aadhar No. \_\_\_\_\_
8. Bank Detail of applicant; Name of branch \_\_\_\_\_
9. IFSC code & \_\_\_\_\_
10. Account no (Aadhar seeded) \_\_\_\_\_
11. BPL Number (if any) \_\_\_\_\_
12. Detail of land proposed for construction of House \_\_\_\_\_  
(copy of revenue papers of the land (Jamabandi and Tatima) to be attached)
13. Whether availed the benefit under Mukhya Mantri Awas yojna/Pradhan Mantri Awas Yojna and Swaran Jayanti Aashray Yojna/ any other House construction Scheme (mention detail)  
\_\_\_\_\_
14. Amount already sanctioned in any other scheme for construction of House \_\_\_\_\_
15. Amount required under Mukhya Mantri Sukh Aashray Yojna \_\_\_\_\_
16. Estimate of construction \_\_\_\_\_
17. If map of building/ House from competent authority is attached (yes/no) \_\_\_\_\_

Photograph

Signature of the Applicant

Date:-

Address for correspondence \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Declaration

I \_\_\_\_\_ daughter /son/wife of Sh. \_\_\_\_\_  
Village \_\_\_\_\_ Post Office \_\_\_\_\_  
Tehsil \_\_\_\_\_ District \_\_\_\_\_ (H.P.) solemnly affirm that all the  
particulars given in the application form are true and no fact has been concealed. I  
also declare that I have availed the grant for construction of House  
under \_\_\_\_\_ scheme of  
\_\_\_\_\_ department or I have not availed  
the grant for construction of House under Mukhya Mantri Sukh Aashray Yojna or any  
other scheme of similar nature of any other Department of H.P. Government/ GOI.

Signature of Applicant/thumb impression

### **Following documents are required to be enclosed along with application form:-**

1. Birth certificate of applicant.
2. Death Certificate of Father & Mother.
3. Certificate of declaration from concerned District Programme Officer, after approval from District Child Welfare and Protection Committee regarding eligibility for availing benefits under the scheme as per clause No. 6 and 9 of the Mukhya Mantri Sukh Aashray Yojna notified vide letter No. SJE-A-F(4)-3/23 dated 28/02/2023.
4. Certificate form CWC regarding declaration of abandoned /surrendered child.
5. Copy of Aadhar Card.
6. Himachali Bonafide certificate of applicant issued by competent revenue officer.  
Or  
Certificate of residency in the State of HP for a period of at least 5 years to be issued by concerned Deputy Commissioner on the basis of the report of the CDPO/ Social Investigation Report (SIR) conducted by the social worker of the DCPU/ Report of Patwari/ concerned Panchayat Secretary and submitted through DPO.
7. Certificate to the effect that the applicant is a resident of the Child Care Institution /After Care Institution of the state (to be issued by DCPO & counter signed by DPO).
8. BPL Certificate (if any)
9. Copy of bank account pass book of the applicant.
10. Copy of revenue papers of the land where construction of house, is proposed.
11. Copy of approved map of the building/ House from competent authority.
12. Copy of Estimate.
13. Copy of sanction of funds for construction of house under any other scheme (if any)
14. NOC regarding non sanctioning of funds for construction of house from Rural Development Department (if applicable).
15. NOC regarding non sanctioning of funds for construction of house from Directorate of ESOMSA (if applicable).



**Verification report**

Certified that particulars given in the application form submitted by Sh./Smt./Ku. \_\_\_\_\_ daughter/son/wife of Sh/Smt. \_\_\_\_\_ Village \_\_\_\_\_ Post-office \_\_\_\_\_ Tehsil \_\_\_\_\_ Distt. \_\_\_\_\_ (H.P.) have been verified and found eligible as per the guidelines of the scheme. Hence recommended for sanction of grant for construction of House under the Mukhya Mantri Sukh Aashray Yojna Scheme. It is also verified that the applicant have avail the grant for construction of House under \_\_\_\_\_ scheme of \_\_\_\_\_ Department or not avail the grant for construction of House under under Mukhya Mantri Sukh Aashray Yojna or any other scheme of similar nature.

District Child Protection Officer  
(Stamp)

Signature of District Programme Officer  
(Stamp)