

Form-Q

(See Rule 33 (2)(c))

APPLICATION FOR EDUCATIONAL ASSISTANCE

To

The Secretary
A&N Islands Building and other Construction Workers Welfare Board
Port Blair

1. Name & Address of the registered construction worker:

2. Registration Number and Date:
(copy of the Identity Card to be enclosed)

2. Details of sons or daughters of the registered construction worker:

Sl No	Name of student	Date of Birth	Class in which he/She is studying	Name of the School

The above details are true and correct to the best of my knowledge and belief.

Place:

Date:

Signature and Name of Applicant

CERTIFICATE

It is certified that the Kr./Kumar.....S/o D/o of
Shri./Smti.....is studying in
class/course..... in this Institution

Signature and Seal of the Institution / School/College