

**APPLICATION FOR SOCIAL AID FOR CHILD/CHILDREN**

## Part I - PARTICULARS OF GUARDIAN

1. N.I.C No.: !Date of Application:
2. Title : !Reg. Card No. :  
!
3. C.F. No. : !Centre:
4. Surname : !Paysite:
5. Other Names : !Application:  
!Reason:
6. Also known as: !
  
8. Tel No:
9. Relationship to child/children:
10. Is applicant already in receipt of a Guardian's Allowance? No  
If yes, give details. C/F No.: Centre:

## Part 2 - PARTICULARS OF FATHER

11. N.I.C No.:
12. Title :
13. Surname : 14. Marital Status:
  
15. Other Names :
16. Address :
  
17. (a) Date of Birth: (b) B.C. No.:
- (c) Reg. Year: (d) C.S.O:
18. (a) Date of Death (where applicable):
- (b) D.C No.: (c) C.S.O:
  
19. Present/Past Occupation:  
Date of Cessation:  
  
Wages p.m.: Rs  
Name of Employer:  
Address:
20. Other income (per month):

SOURCE

INCOME (Rs) REMARKS

Social Aid

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21. Reason for not providing for child/children:

22. Remarks:

**Part 3 - PARTICULARS OF MOTHER**

23. N.I.C. No. :

24. Title :

25. Surname :

27. Other Names :

26. Marital Status:

28. Maiden Name :

29. Address:

30. (a) Date of Birth:

(c) Reg. Year:

31. (a) Date of Death (where applicable):

(b) D.C No.:

32. (a) Date of Civil Marriage (where applicable):

(b) M.C No.:

(b) B.C. No.:

(d) C.S.O:

(c) C.S.O:

(c) C.S.O:

33. Present/ Past Occupation:

Date of Cessation:

Name of Employer:

Wages p.m.:Rs

Address:

34. Other income (per month):

SOURCE

INCOME (Rs) REMARKS

35. Reason for not providing for child:

36. Remarks:

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Part 4 - (37) Particulars of children under 20 in respect of whom Social Aid is being claimed

N.I.C No.	Name	Other Names	D.O.B	B.C No./Year	C.S.O	Class
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37. Does/Do any child/children derive any pension/benefit from this Ministry?

N.I.C No.	Name	Other Name	Benefit C/F No. Type	Amount p.m.
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38. Remarks:

**Part 5 - DECLARATION OF GUARDIAN**

39. I declare that the statements made by me and recorded on this form have been read over/translated to me and are true and correct to the best of my knowledge and belief and I also undertake to inform this Ministry of any change in the particulars herein.

Date:

.....  
Signature/Thumbprint

**Part 6 - REGISTRATION & CHECKING**

40. Application registered by:

.....  
Signature of SSO

41. Application checked by:

.....  
Signature of HSSO

Social Aid

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& SENIOR CITIZEN WELFARE & R.I.**

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**Social Aid**

Date:

**APPLICATION FOR SOCIAL AID/UHR**

Part I - PARTICULARS OF APPLICANT

1. N.I.C. No:
  2. C.F No.:
  3. S.S. No.:
  4. Title :
  5. Marital Status:
  6. Surname:
  7. Other Names:
  8. Maiden Surname:
  9. Also known as:
  10. Address:
  11. Tel. No.:
  12. (a) Date of Birth:  
(c) Reg. Year:
  13. (a) Date of Death (where applicable):  
(b) D.C. No:
  14. (a) Date of Civil Marriage (where applicable):  
(b) M.C. No:
  15. Reason for application:
  16. Has applicant/partner ever applied previously for Social Aid?
- !App. Type:  
!Date of Application:  
!  
!Reg. Card No.:  
!Centre:  
!Paysite:  
!  
!  
!Applicable to UHR only:  
!UHR Type:  
!  
!ERB Card No:  
!Last ERB registration date:  
!  
!  
!  
(b) B.C. No.:  
(d) C.S.O:  
(c) C.S.O:  
(c) C.S.O:



32. Present/Past Occupation:

Date of Cessation:

Name of Employer:

Salary/Wages p.m.: Rs

Address:

33. Other income (per month):

SOURCE

INCOME (Rs) REMARKS

34. Is partner drawing any pension/benefit from this Ministry? Yes/No.

Benefit C/F No.

Amount p.m. Rs

35. Remarks:

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**APPLICATION FOR SOCIAL AID/UHR**

Part 3 - PARTICULARS OF ACCOMODATION OF HOUSEHOLD

35. Type of household: Rented House

If paying rent, Rent Book verified?

Rent p.m.:

Name of Landlord:

Address:

Part 4 - Particulars of dependent children (children between 0 and 20 should be attending school or unfit for work)/other members

N.I.C No.	Name	Other Names	Sex	D.O.B	B.C No./year	C.S.O	School Class/ Unfit	Sick
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37 (b) Particulars of Non-dependent children under 20 and single

N.I.C No.	Name	Other Names	Sex	D.O.B	B.C No.	C.S.O	Occupation
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and belief and I also undertake to inform this Ministry of any change in the particulars herein.

Date:

.....

Signature/Thumbprint

Part 7 - REGISTRATION & CHECKING

49. Application registered by:

.....

Signature of SSO

50. Application checked by:

.....

Signature of HSSO