

To

Marshal of the Air Force & Mrs. Arjan Singh Trust
C/O Air Force Association
412 AF Station
Race Course Camp
New Delhi – 110 003

APPLICATION FOR FINANCIAL GRANT

1. Name of applicant _____ Widow/Son/Daughter of _____
2. Service No _____ 3. Rank _____
4. Address _____

5. Tele No. _____ E-mail _____
6. AFA Life Membership No _____
7. Is the applicant member of ECHS - Yes/No
8. Date of Birth _____ Date of Commission/Enrolment _____
9. Date of discharge _____ Date of Death(if applicable) _____
10. Reason of Discharge _____ Cause of Death _____
11. Pension : Rs. _____ +DA _____
12. Any other income. _____
13. Present Status (employed or unemployed) _____
14. Nature of Pension : Service/Family/Disability/Civil.
15. Details of Property owned. _____
16. Income from house property if any. _____
17. Particulars of Family/dependants

Sl No.	Name of the individual	Relationship with ESM	Dependant or Not	Age/ Sex	Occupation /Class	Monthly Income

18. Purpose for seeking grant.(in brief) _____

19. Details of previous grants/assistance received from Centre/State Govt/Air Force Sources/Kendriya Sainik Board/ECHS etc.

Date	Source/ Fund	Amount

20. Brief circumstances of distress(with proof & duly authenticated by the competent authority)

CERTIFICATE

21. Certified that all the above facts have been correctly revealed and no information has been concealed to the best of my knowledge.

Date : _____

Signature of the applicant

Caution:- Any wrong declaration or concealing or facts may adversely affect consideration of the application and may debar you from any further assistance/financial help. In your own interest, please fill the details correctly. No Column should be left blank.

22. Recommendation by the respective branch of Air Force Association/AOC/Stn Cdr/OC Unit.

Date :

Seal :

AOC/Stn Cdr/OC Unit (or)
AFA Branch Head

23. Following documents are to be sent as applicable :-

- (a) Photocopy of ESM/Widow I Card and AFA card.
- (b) Attested photocopy of discharge book
- (c) Original medical bill and treatment certificate from the Doctor (in case of medical claim)
- (d) Wedding card of the daughter (in case of marriage Grant)
- (e) Photocopy of latest PPO
- (f) Relevant document relating/supporting any other distress situation/contingency.

Note : Forward the application through respective Branch of Air Force Association or the nearest AF Station/Unit.

