



GOVERNMENT OF JHARKHAND  
DEPARTMENT OF SOCIAL WELFARE

APPLICATION FORM OF MUKHYA MANTRI KANYADAN YOJANA

Annexure -1

1.Name of the Bride:	<input type="text"/>
2.Father's Name :	<input type="text"/>
3.Mother's Name:	<input type="text"/>
4.Applicant's Name:	<input type="text"/>
5.Applicant's <input type="radio"/> Father's/ <input type="radio"/> Husband's Name :	<input type="text"/>
6.Relation of Applicant with the Bride :	<input type="text"/>
7.Date of Birth of the Bride :	<input type="text"/>
8.Educational Qualification of the bride :	<input type="text"/>
9.Is the bride disable? :	<input type="radio"/> Yes <input type="radio"/> No
10.Is the bride daughter of a widow? :	<input type="radio"/> Yes <input type="radio"/> No
11.Caste ,Religion and Nationality :	<input type="text"/>
12.Serial number of BPL Card of the Family :	<input type="text"/>
13.Description of the family of the Groom (Bride's Husband):	
a. Name of the Groom	<input type="text"/>
b.Father's Name of the Groom :	<input type="text"/>
c.Date of Birth :	<input type="text"/>
d.Caste and Religion :	<input type="text"/>
e.Address :	<input type="text"/>
f.Educational Qualification :	<input type="text"/>
g.Occupation :	<input type="text"/>
h. Annual Income	Rs. <input type="text"/> /-

**Annexure-2**

**Declaration (Jointly by both the Parents)**

We, the mother and father of the girl (the bride) do hereby declare jointly that:

- 1.We are the competent beneficiary of this Mukhya Mantri Kanyadan Yojana
- 2 No transaction of dowry is taken place in the marriage of the girl. .
- 3.No misuse of the money so received under Kanyadan Yojana should be done.
- 4.We do hereby give our consent to solemnize the marriage individually or collectively on the auspicious date and place selected by the Deputy Commissioner.
- 5.All details entered in the Application Form is true and no fact is concealed thereof.
- 6.Should any information given by us be found false,we will be debarred from the candidature and libel to legal action and will have return the amount so received

Date

Signature/Thumb impression of the Father:

Signature/Thumb impression of the Mother: