

ANNEXURE – II

SAVE THE GIRL CHILD

Union Territory of Dadra & Nagar Haveli
Medical Superintendent, Shri VinobaBhave Civil Hospital, Silvassa

APPLICATION FORM FOR SAVE THE GIRL CHILD SCHEME

To
The Medical Superintendent,
Shri VinobaBhave Civil Hospital,
Dadra & Nagar Haveli,
Silvassa

SUB: Application regarding taking benefit of ` 41,799/- under **“SAVE THE GIRL CHILD”**
Sir,

I have given birth to a girl child. The following details are furnished herewith for taking benefit under **“SAVE THE GIRL CHILD”**:

1	Name of Applicant (Mother)	
2	Name of husband	
3	Full Address (Resident certificate must be attached)	
	House Number	
	Locality	
	Village	
	Block/Tehsil/Taluka	
	District	
4	Date of birth of applicant (mother) (Birth Certificate of Mother must be attached if available)	
5	Date of marriage of applicant (Marriage proof i.e. Marriage Certificate, Certificate issued by Religious organization, social organization, marriage card etc. must be attached)	
6	Date of birth of new born girl child	
7	Proof of institutional delivery (Certificate issued by Hospital/ Clinic in prescribed format must be attached)	
8	Name of new born girl child (Birth certificate must be attached)	
9	Number of surviving child/children to the applicant including this birth (boy & girl)	
10	Name of girl child/children in the family already benefited under SAVE THE GIRL CHILD scheme	
11	Whether belonging to SC/ST/OBC/Other	
12	Whether belonging to BPL families	
13	Any other information if required	

It is therefore requested that the benefit of ` 41,799/- under “**SAVE THE GIRL CHILD SCHEME**” may please be sanctioned in favour of my above named new born daughter.

I have also attached herewith a pre-stamped acknowledgement receipt for ` 40000/-

Place: _____

Thumb impression/Signature

Dated: _____

Name _____

CERTIFICATE

It is to certify that the above information is true and correct to the best of my knowledge and belief.

Place: _____

Thumb impression/Signature

Dated: _____

Name _____

Witnesses: _____

With Name and Address: