# APPLICATION FOR UNEMPLOYMENT ALLOWANCE TO DISABLED PERSONS.

1. Name of the Disable Person/ Applicant: \\
2. Name of Father/Husband: \\
3. Date of Birth/Age (Proof to be attached): \\
4. Full Address where the Applicant is residing for the last three years: \\
5. Caste (Whether belongs to SC/OBCs/others): \\
6. Sex (Male/female): \\
7. Whether married/unmarried: \\
8. Nature & Percentage of disability (certificate to be attached): \\
9. Education Qualification: a)
   b)
10. Total annual income of family from all sources: \\
11. Whether Registered with Regional Employment Exchange, UT, Chandigarh, if so, please indicate Registration No. Date: \\

**DECLARATION**

I, ________________________ S/o, D/o ________________________ do hereby solemnly affirm resident of __________________ do hereby solemnly affirm and declare that the information/ particulars given above by me are correct to the best of my knowledge and belief and nothing has been concealed therein.

Signature of the Applicant

Place:
Date: (Attestation by Executive Magistrate/Gazetted Officer/Notary/Oath Commissioner)

**REQUIRED DOCUMENTS:-**

(i) Date of Birth Certificate.
(ii) Identity Card (Shows nature and percentage of disability)
(iii) Education Qualification
(iv) Copy of Employment Registration Card.