

ANNEXURE-VI
**APPLICATION TO BE SUBMITTED BY THE TEMPLE EMPLOYEES
IN SERVICE FOR GETTING FINANCIAL ASSISTANCE FROM
THE CHIEF MINISTER'S WELFARE FUND**

To
The commissioner
Hindu Religious Institutions
Puducherry.

1. Name and Location of the Temple :
2. (i) Name of the Employee :
- (ii) Designation :
- (iii) Sex : Male / Female
- (iv) Age :
3. Date of Joining the Duty :
4. Maital Status :
5. Monthly Salary and Aid :
6. Permanent Address of the Employee :
7. Legal heir of the temple Employee on death,
Relationship to be specified :
8. If the temple employee has worked in other temples,
Mention its name and address :

Signature of the Temple Employee

Witnesse's signature with address :

- (1)
- (2)

UNDERTAKING

The above said particulars are true to the best of my knowledge and belief.
The family of the temple employee is eligible for getting the Chief Minister's Welfare Fund.

Place :
Date :

*President/Board of Trustees
Special Officer / Executive Office*