

Data Entry Form

Type of Registration : ESM Officer MNS
 (uptick the related box)
 APS Widow

A Service Details

1 **ESM Registration No and date *** : P D Y - 1 -
 dt.

2 If Type of Registration is Widow
 enter the **Widow Registration No.***
 Date of Expiry of ESM : P D Y - 1 -
 dt.

3 Service * : Army Navy Air Force
 If service is Army enter Corps :

4 Name of Record Office * :

5 Group * :

6 Trade * :

7 Service Number * : Check suffix

8 Rank * :

9 Name * :

10 Gender * : Male Female

11 Date of Birth * :
 dd mm yy

12 Enrolment Date * :
 dd mm yy

13 World War II : Yes No

14 Operations attended :

15 Decorations :

B Pension Details

16 Unit Last served * :

17 Date of Discharge * :
 dd mm yy

18 Reason for Discharge : on completion of engagement/Retired/Medical/Injury
 /Dismissed/ VRS /Expired

19 Medical category while Discharge :

20 Character While Discharge :

21 Discharge Book No. :

22 PPO No. :

23 Pension sanctioned : Present Pension

24 Disability Pension	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
25 Percentage of Disability	:				
26 If Type of Registration is Widow mention the family pension	:				
27 Pension a/c No.	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
28 Name of the Bank and Branch	:				
29 IFSC Code	:				
C Personal Details					
30 Father's Name *	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
31 Mother's Name *	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
32 Identification mark *	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
33 Religion	:				
34 Caste & category	:				SC/ST/OBC/MBC/OC
35 Birth Place *	:				
36 Birth State *	:				
37 Birth District *	:				
38 Educational Qualification in Civil	:	SSLC/HSC/PUC/UG/PG/Diploma/Engineer/PG Diploma/			
39 Equivalent Tests passed in Service	:				
40 Civil Employment status (uptick the related box)	:	Employed	<input type="checkbox"/>	Un-Employed	<input type="checkbox"/>
				Retired from Civil service	<input type="checkbox"/>
If employed					
41 Employer	:				
42 Monthly Income	:				
43 Department	:				
44 Official contact Number	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
If retired from civil service					
45 Date of Retirement from civil service	:				
46 Civil PPO No.	:				
If un-employed/retired					
47 whether willing for Watch & Ward / Security Job	:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
48 Courses completed in relation with Fire fighting/ Security	:				

49 ESM Aadhar card Number	:	<input type="text"/>
50 ESM PAN Card Number	:	<input type="text"/>
51 ESM CSD Card Number	:	<input type="text"/>
52 ESM ECHS card Number	:	<input type="text"/>

D Contact Details

	Permanent Address	Present Address *
53 House No	:	
54 House Name	:	
55 Street	:	
56 City	:	
57 District	:	
58 State	:	
59 Pin Code	:	
60 Thane/Police Station	:	
61 Telephone No.	:	
62 Mobile No.	:	
63 E-Mail address *	:	

E Family Details

64 Martial Status *	:	Married <input type="checkbox"/>	Single <input type="checkbox"/>	
		Divorced <input type="checkbox"/>	Widower <input type="checkbox"/>	
65 Date of Marriage *	:	dd	mm	yy
		<input type="text"/>	<input type="text"/>	<input type="text"/>
66 Spouse Name *	:	<input type="text"/>		
		<input type="text"/>		
68 Spouse Relation *	:	Wife <input type="checkbox"/>	Husband <input type="checkbox"/>	
		dd	mm	yy
67 Spouse Date of Birth *	:	<input type="text"/>	<input type="text"/>	<input type="text"/>
68 Spouse Identification Marks *	:			
69 Spouse Qualification	:			
70 Spouse Employment status	:	Employed <input type="checkbox"/>	Un-Employed <input type="checkbox"/>	
71 Spouse Employed Profession	:			
72 Date of Retirement of spouse	:			
Nomination				
73 Name of the Next of Kin *	:			
74 Relation to the ESM *	:			

F Dependant parents and children including above 25 years /married /employed *

* mandatory

Name	Relation	Date of Birth & Adhar No.	Qualification with course/class	Academic Year	Employment status	Martial status
						Married/ un married
						Married/ un married
						Married/ un married
						Married/ un married

Complete all the columns. The columns wherever not applicable please mention as N/A or Nil.

I hereby declare that the particulars given above are true to the best of my knowledge.

Name and signature of the ESM/Widow

Copy of the documents to be attached

Discharge book

PPO

ID card issued from the Department of Sainik Welfare, Puducherry

Adhar Card

PAN Card

ECHS Card

Voter ID Card

For self, spouse and dependents

Pension a/c pass book 1st page wherein details of a/c Number and Bank IFSC available

Pasport size Self and join photo 2 Nos Each