

**APPLICATION FOR NATIONAL SOCIAL ASSISTANCE PROGRAMME (NSAP)**

Pension Scheme:  IGNOAPS  IGNWPS  IGNDPS

Name of Pensioner : \_\_\_\_\_

Father's/Mother's Name \_\_\_\_\_

Or \_\_\_\_\_

Husband's/Wife's Name \_\_\_\_\_

Gender (Male/Female) : \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

or \_\_\_\_\_

(Proof of Birth) \_\_\_\_\_

Category : \_\_\_\_\_

(SC/ST/OBC/Minority/Gen.) \_\_\_\_\_

Address : \_\_\_\_\_

Village/locality: \_\_\_\_\_

GramPanchayat:/Ward: \_\_\_\_\_

Sub District/Block : \_\_\_\_\_

District : \_\_\_\_\_

State : \_\_\_\_\_ PIN \_\_\_\_\_

Aadhar no.: \_\_\_\_\_ Ration Card no.: \_\_\_\_\_

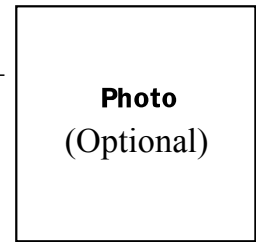
Electoral Photo Identity Card (EPIC) no. \_\_\_\_\_

In case of Disability Pension- Type of Disability \_\_\_\_\_

(As indicated in certificate)

Details of Bank/ Post Office Account of Pensioner: \_\_\_\_\_

(if available)



Signature of the Applicant/Thumb Impression

Counter Signature  
of Verification Officer \_\_\_\_\_

Designation \_\_\_\_\_

Name \_\_\_\_\_

**Consent Form**

I ..... (Name) Beneficiary  
Number ..... /Sanction Order number  
....., holder of Aadhaar No. and Mobile  
No. .... hereby give my  
consent to the implementing Department, Government of  
..... and Department of Rural  
Development, Government of India, for using my Aadhaar number and mobile number to  
establish and authenticate my identity under National Social Assistance Programmes. Further,  
I hereby give the consent that my Aadhaar number may be seeded with my bank account and  
can be used for authentication and disbursement of pension in my account.

(Signature/Thumb impression)

Date:

Name:

Address:

**Identified by:**

(Signature)

Name:

Designation/Address: