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SCHEME FOR FINANCIAL ASSISTANCE FROM KERALA STATE  
WELFARE FUND FOR WORKING JOURNALISTS/  
DEPENDANTS IN DISTRESS

ANNEXE I

Form of Application

To

The Director of Public Relations,  
Government of Kerala, Trivandrum.

1. Name in full (in capital letters):
2. Age and date of birth:
3. Full Address:
4. In the case of living journalists:
  - (a) Details regarding the service of the applicant as a journalist
  - (b) Whether unemployed due to ill health
  - (c) Whether unemployed due to overage
5. In the case of families dependant of the deceased journalist:
  - (a) Contribution of the deceased journalist to journalism
  - (b) The applicant's relationship with the deceased journalist (whether widow/son/unmarried daughter/father/mother):
6. I hereby certify that—
  - (a) My income from all sources is Rs.....per annum.
  - (b) All the above particulars furnished by me are true and correct to the best of my knowledge.

Place:

Date:

*Signature of the Applicant.*

## ANNEXE II

Report of the Tahsildar/President/Secretary of Working  
Journalists Union/District Information Officer

I have made necessary enquiries regarding the statements in the application form of Shri/Smt.....and submit the following report:—

- (1) The applicant comes under the Scheme for giving financial assistance to Working Journalists/Dependants in distress.
- (2) The journalist is unemployed due to ill health/overage.
- (3) The applicant is the widow/son/unmarried daughter/father/mother of the late.....
- (4) The age of the applicant as verified from the certificates of date of birth furnished by the applicant or other reliable records (to be specified) is.....years.
- (5) The total income of the claimant is Rs.....per annum.
- (6) The particulars furnished by the applicant is/are not correct.
- (7) Other remarks if any.

Place:

Signature:

Date:

Name and address with office seal: