

SOCIAL JUSTICE & EMPOWERMENT DEPARTMENT
Directorate of SCs, OBCs, Minority & Disability Affairs

**APPLICATION FORM UNDER THE SCHEME INCENTIVE FOR MARRIAGE TO
PERSONS WITH DISABILITY**

1.	Name of the applicant	<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> PASTE PHOTOGRAPH OF COUPLE </div>
2.	Date of birth	
3.	Caste	
4.	Father's name	
5.	Permanent address	
6.	Type of disability & percentage of applicant	
7.	Name and address of the person to whom married	
8.	Date of birth of spouse	
9.	Date of marriage	
10.	Whether the spouse is disabled, if yes, type of disability and percentage	
11.	Details of saving bank account: i) Branch name ii) Branch code iii) IFSC code iv) Account Number Aadhar card no.	

Date:

Signature of Applicant

Note.—The applicant shall submit following documents with the application :

1. Bonafide Himachali Certificate issued by the Executive Magistrate.
2. Marriage Registration Certificate issued by the competent authority.
4. Disability Medical certificate issued by the competent medical authority.

Recommendation of the Tehsil Welfare Officer

Signature of Tehsil Welfare Officer