



# MINISTRY OF MINORITY AFFAIRS

(Government of India)

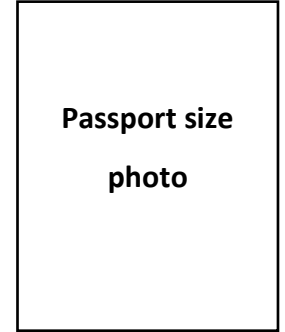
## “NAI- ROSHNI”

Leadership Development Programme for Minority Women  
RUN BY : BHAGINI NIVEDITA SHIKSHA SAMITI



### Application Form

- 1- Name of Trainee .....
- 2- Daughter/Wife of .....
- 3- Contact No./Mobile .....
- 4- Date of Birth .....
- 5- Annual Family Income .....
- 6- Name of Community : Muslim ( ) Christian ( ) Parsis ( ) Jain ( ) Buddhist ( )
- 7- Marital Status : Married ( ) Unmarried ( ) Widow ( )
- 8- Email : .....
- 9- Aadhaar No. : ..... Voter ID No. ....
- 10- Address : .....
- Town/Village ..... District ..... Block .....
- State ..... Pin Code .....
- 11- Bank details of trainee for stipend :
- Bank Name ..... Account Number .....
- IFCS Code ..... Bank Address .....



### 12- Education Details :

S.No.	Basic Education	Stream/Specialization	School/University	Year of Passing
1				
2				

### Declaration

I declare that all the information given by me is correct and true to my knowledge. I understand that in case of any information furnished above is found to be incorrect my admission/ Registration/ Certification /Stipend shall be cancelled with all liabilities on me. I am interested to take Leadership Development Training under Nai-Roshni Scheme.

Date \_\_\_\_\_

Signature \_\_\_\_\_

**Document Enclosed with Application Form:** Copy of Aadhar Card, Voter ID Card, Cast Certificate, Education Qualification certificate, Bank Passbook and 2 Color Photographs with application form.