

**SHIWALAYA**

a project of **Red Swastik Society** for Senior Citizen

Survey no. 172/2B, Chaure village, Taluka - Kalyan Dist - Thane

H.O: Red Swastik Society, 2nd floor, 240, Navsari Bldg., D.N. Road, Fort, Mumbai-400001

Reg No: Mumbai 439/200/GBBSD dt. 27/3/2001

www.shiwalaya.org : email-surya@shiwalaya.org

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**Application form for Admission**

1. Name of Applicant

- a. Shri/Smt/Kumari.....
- b. D/W/H of .....
- c. Gender - Male/Female
- d. Address.....

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Contact no. ...., Mobile no. ...., Email.....

2. Marital status - Married/Unmarried/Widow/Divorced/Widower

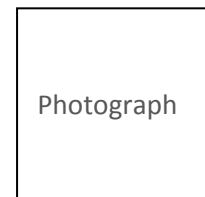
3. Birth date : date / month /year

4. Present age\*: .....Yrs .....months

5. Educational Qualifications: .....

6. Occupation/ Profession\*\* : .....

- a. If retired, occupation before retirement: .....



7. Source of Income:  
.....

8. Person with whom applicant is presently staying:

Name .....

Address .....

Tel. no....., Mobile No..... Email .....

9. Reason for seeking admission to "Home" .....

10. Applicant's Hobbies & other interests  
.....

11. Would you like to give any service in the Ashram  
.....

12. Likely duration of stay: temporary/permanent..... months/years

13. Preference for accommodation: single/double/couple.....

Reason for such preference: .....

14. Full Names of two citizens for references who know you personally and who may be contacted for references:

i. Name .....

Address.....

Tel No: ..... Mobile..... Email.....

ii. Name .....

Address.....

Tel No: ..... Mobile..... Email .....

15. Name, address & Tel. no. of relative/ next of kin/ other persons to be contacted in case of any emergency:

Name .....

Address.....

.....

Tel No: ..... Mobile..... Email .....

**Declaration:-**

1. I hereby declare and confirm that the above information provided by me in this application is true and accurate in all respects.
2. I am able / not able to take care of my daily routine work without any outside help or assistance.
3. The prescribed medical statement and consent letter from my relatives/caretaker/friend is attached.
4. I have received a copy of the Rules and Regulations governing and regulating my admission and stay at the "Home". I confirm having read them carefully and understood fully and I will abide by them.

Date:

Place:

\_\_\_\_\_  
Signature of Applicant

\* Please provide proof of age - Copy of Pan Card/ Passport Voters I.D./Residential Proof

\*\* Employee/ Business / Pensioner