

(FIR must be produced)

Schedule – I APPLICATION FORM FOR FINANCIAL ASSISTANCE TO JOURNALISTS OUT OF JOURNALIST WELFARE FUND (JWF)

	o. he Director General,					
۲	Public Relations, Balochistan. Shara e Adalat Quetta.					
1	Name of the Journalist seeking financial assistance					
2	(or for whom financial assistance is being sought) In case of demise of the Journalist:					
3	Name of the applicant in full, along with address and relation with the deceased Journalist Date of birth of the Journalist					
	(Aftach documentary proof)					
4.	Contact Details: - (i) Full postal address of Journalist /claimant					
	(Proof of residence be attached)					
	(ii) CNIC No.					
	(iii) Mobile/Phone No.					
	5. (i) Whether Journalist is citizen of Pakistan, (Tick one)					
	(ii) Whether Journalist is ordinarily resident of Balochistan (Tick one) نود Yes مناها No					
3,	(ii) Whether bournaint is brainainty restaurated to the large Petroschie					
	(Indicate if applicable)					
7.	Reason and purpose for financial assistance					
	(Attach documentary proof as applicable) (i) Death of Journalist resulting in extreme hardship to family:					
	Mention date, nature & cause of death (death certificate). (ii) Permanent disability rendering the Journalist incapable of earning a livelihood					
	(iii)Major ailments: mention details of nature & duration of ailment along with the place (name of hospital), nature (drugs/surgery/ radiotherapy, etc.) and period of treatment Sought					
	(iv) Accidents causing serious injuries necessitating hospitalization: mention details including date of accident and place, nature & period of treatment					

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It Bills in Mr titles . smount of financial assistance sought (please attach a bill summary of all individual bills/receipts in case of multiple bills duly ventied by the concerned) Details of financial assistance received/applied for from other sources: (eg. PM Relief Fund, CM Relief Fund, Journalist Associations/ Organizations, Insurance claims. Motor Accident Claims, Tribunal, others if any) 10. Family details (applicable only in case of death/disability of journalist) Relationship with the Date of Birth/Age Sex (M/F) S.No. Name of Family deceased Journalist in completed Member years 11. Bank's Accounts details (Please provide the full details as per Mandate Form enclosed). 12. Any other relevant information Documents attached with this application **CNIC Copy (Attested)** Photograph Local/Domicile (Attested) (ii) Nikah Nama in case of assistance for marriage (iii) Medical Receipts Original duly verified by the concerned. (iv) (v) Death Certificate in case of deceased Journalist issued by the NADRA I hereby certify that all the above particulars furnished by me are true to the best of my knowledge and nothing relevant has been concealed therefrom I undertake to refund the assistance if it is found at any stage that it was obtained on the basis of false information and misrepresentation of true facts along with the interest at the prevailing banks rates. Verified By Signature of the Applicant President BUJ Place; __ Date: Countersigned by **Director General** Public Relations Balochistan.

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MANDATE FORM

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