



గ్రామ - వార్డు సచివాలయం



ఆంధ్రప్రదేశ్ ప్రభుత్వం

SADAREM APPLICATION FORM

1. Aadhar Number:
2. Ph.No (Aadhar Link Mobile Number):
3. Date Of Assessment:
4. Name Of The Person:
5. Age:
6. Date Of Birth:
7. Gender:
8. Education:
9. Employment:
10. Marital Status:
11. Caste:
12. Religion:
13. Ration Card No:
14. Type:
15. Si.No:
16. EPIC Card: Yes/No
17. Pension Card: Yes/No
18. Identification Mark: A.
B.
18. Consanguineous Marriage Of Parents: Yes/No
19. Father/Mother/Husband/Guardian's Name:
20. Relation:
21. Address (As Recorded In Ration Card):

House No:

District:

Mandal:

Panchayath:

Town/Village:

Habitation/Ward No:

Phone No:

E-Mail:

Pin Code:

22. Existing Percentage:

23. Aadhar Card No:

24. Hospital:

25. Type Of Disability:

Signature Of The Volunteer

Mobile No:

Signature Of The Applicant