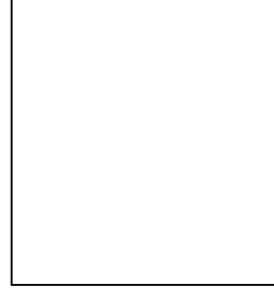


**Format-I**  
**Bhagyalaxmi Scheme**  
**Application for Enrollment**

Joint photo of  
the parents  
with the child



1.	Name of the Child	
2.	Date of Birth as per Birth Certificate ( Should be obtained from Metropolitan/ Corporation / Muncipal Corporation/ Village Accountant)	
3.	Mother's Name	
4.	Father's Name	
5.	Address	
6.	(a) Occupation of the mother (b) Occupation of the father	
7.	Family Income per Annum	
8.	(a) Number of children in the family. (b) Order of the girl - child in the family now availing the benefit	
9	SC/ST/ Others	
10	Declaration Number of Below Poverty Line family ( Attach Xerox copy of the same/ ration card)	
11.	Whether the child has received immunization. If so, attach Xerox copy of the immunization card.	

Place:

Signature of the Applicant

Date:

(Mother/ Father/ Guardian of the Child)

- \* The girl child should have been born after 31/03/2006
- \* The Anganwadi Worker should submit along with the Birth Certificate of the child within one month of birth of the child.
- \* It is compulsory that the name of the child be mentioned.

**Format-II**

**Affidavit**

To avail the benefit of Rs. 10,000/- fixed deposit under Bhagyalaxmi Scheme

I / We Shri.....Smt.....

Father / mother of the first / second girl –child born on .....Agree to abide by the following terms and conditions putforth by the Government

- I. Will bring up the girl – child without any gender discrimination
- II. Will not make her a child labourer for any reason
- III. Will educate her minimum upto 8<sup>th</sup> Standard
- IV. Will not get her married before the age of 18

I / We agree to forfeit the amount sanctioned in case of breach of the above mentioned terms and conditions.

Place:

Date:

Signature of the Father  
(LTM)

Signature of the Mother  
(LTM)

**Format-III**

**Declaration of the Supervisor**

Mrs .....w/o .....resident of .....  
.....coming under the  
jurisdiction of ..... Child Development Project Office  
.....Circle .....Village Anganwadi Center has given  
birth to first/ second girl- child on .....and is eligible for  
sanction of fixed deposit of Rs. 10,000/- under Bhagyalaxmi Scheme. The  
child is named ..... . The Birth Certificate with the name of the  
child has been verified and attached. The attached record saying that the  
Father/ Mother of the child belong to Below Poverty Level is verified and  
attested.

This family has a total of .....living children and the father/ mother  
has adopted permanent family planning certificate in this regard.

Place:                      **Signature of Anganwadi Worker**      **Signature of Supervisor**

Date:

Anganwadi centre

Name:

Name of the Circle

- \* The Supervisor of the Circle is to obtain all necessary documents along with the application from the Anganwadi Worker and submit the consolidated list within one month to the Child Development Project Officer.
- \* In the areas not covered by Anganwadi Centre , the staff of the Corporation & CMC are entrusted this work.

**Format –IV**

**Recommendation by the Child Development Project Officer**

The details of Mrs.....wife of .....village  
.....Hobli.....Taluk furnished by Mrs.....  
Supervisor of .....Circle are accurate. It has been  
recommended to the Deputy Director/ Assistant Director, Department of  
Women and Child Development , .....District to  
deposit an amount of Rs. 10,000/- ( Rupees Ten thousand only) as Fixed  
Deposit.

Place:

**SIGNATURE OF THE CDPO**

Date:

along with Seal

- \* The Child Development Project Officer is to gather information from all Circles and submit it within 15 days to the concerned District Deputy Directors, Department of Women & Child Development.

**Format-V**

**Proceedings of the Deputy Director / Assistant Director, Department of  
Woman and Child Development, .....District / Office**

**Sanction Order**

The Child born on .....date is the first / second child in the family  
of Mrs.....husband .....resident of  
.....Taluk .....District .....Hobli has been  
sanctioned an amount of Rs. 10,000/- ( Rupees Ten Thousand Only) in the  
Head of Accounts 2235-02-102-0-25-100 Financial Assistance / Relief ( Plan)  
to deposit as fixed deposit for a period 18 years. It has been ordered that  
this amount be deposited as fixed deposit in .....institution.

Place: Signature and Seal of the Deputy Director,  
Date: Department of Woman & Child Development  
District / Office

**Format –VI**

**Time allotted to identify the Beneficiaries to keep Fixed Deposits in  
Financial Institutions under Bhagyalaxmi Scheme**

Sl. No	Details	Time Allotted
1.	Anganwadi Worker/ Supervisor to identify the girl child and obtain application along with birth certificate from the parents of the child and verify and submit them to the CDPO	1 Month
2.	CDPO to verify the documents and submit the proposal for approval to the Assistant Director / Deputy Director	15 days
3.	Assistant Director / Deputy Directors to verify the proposals forwarded by the CDPOs and submit the proposals to head office for release order	15 days
4.	Release of grants to the Assistant Director/ Deputy Directors and feed information to the NMC	15 days
5.	Time allotted for the Deputy Directors to draw money from the Treasury and deposit it in the name of the beneficiary in financial institution.	15 days