

NATIONAL SOLIDARITY FUND

Application for financial assistance
DESTITUTES



Section A: Details of Applicant

Surname:

Other Name:

NIC No.

Gender: Male Female Age:

Address:

Phone Number: Home: Mobile:

Marital Status Married Single Separated/Divorced/Widow(er) Other

Occupation:

Name of
Spouse/Partner/
Guardian:

SURNAME:

OTHER NAMES:

Occupation:

No. of dependent children:

Section B: Bank Account Details of applicant

Name:

Bank Name:

Bank Account Number:

Section C: Reason for application

Section D: Declaration

I understand that the information given by me will be verified by National Solidarity Fund. I certify that the above information is true and correct. Any wrong information may lead to the application being rejected.

Applicant's signature _____

Date: _____

Name: _____

Notes to Applicant

The completed form should be submitted with the following documents:

- 1 Copy of National Identity Card
- 2. Where applicable:
 - (i) Original certificate attendance from school ifo children
 - (ii) Copy of Birth certificate of children
 - (iii) Original medical certificate
- Funeral Expenses:
 - (iii) Copy of Death certificate
 - (iv) Original receipts of expenses incurred (Funeral expenses)
- 3. Copy of Bank Account Number
- 4. Copy of Proof of address

The National Solidarity Fund
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Port Louis
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