



The IndusInd Foundation

Corresponded Address: Plot C-21 (1-3 floors),
G-Block, Bandra Kurla Complex, Bandra (East),
Mumbai - 400051

इंडसइंड फाउंडेशन

Tel. No. (Board): +91-22-6136-0407

2025 APPLICATION FORMS FOR ALL EXISTING BENEFICIARIES
(WIDOWS/ HANDICAPPED/ POOR)

(Age above 60 ONLY)

• Please fill the form in English

• Personal Information

• Date: _____

Full Name _____ : _____ D.O. B: _____

Residential Address: _____

Phone Number: _____ Alternate Phone number: _____

1. House own/ Rental amount: _____

2. Profession of beneficiary: _____

3. No. of Children (Boys/Girls with details): _____

a) Name: _____ Age:/Income _____/ _____

b) Name : _____ Age:/Income _____/ _____

c) Name: _____ : _____ Age:/Income _____/ _____

4. Beneficiary Staying Details: _____

5. Children's Profession status / Married / Unmarried: _____

6. Any other financial help, pension, scheme amount you are receiving: _____

7. Total monthly income of family: _____

Signature of Beneficiary : _____

P.T.O



OFFICE USE ONLY

Documents Attached:

1. Copy of Passport-size photo of Beneficiary
2. Copy of Aadhar Card/PAN card
3. Copy of cancel cheque/Bank passbook
4. Copy of Ration card copy
5. Copy of Death Certificate of husband (if widow)
6. Recommendation letter of beneficiary from your association

(Recommendate association: Kindly keep the photo copy of form for your record).

All the above Information is checked by us and is true

Recommended by association:

Signature, Designation with address Stamp
of Association/Panchayat/ References

Approved by:_____

IndusInd Foundation

Hon. Managing Trustee