



FIIBM-10145/5101

**HINDUSTAN JAN KALYAN RASHTRIYA VIKAS SEWA SAMITI**  
**ADMINISTRATIVE AUTONOMOUS ORGANIZATION**  
**(ALL STATES OF INDIA)**  
**&**  
**CAREER REGISTRATION FORM**  
[\*\*Govt. Services\*\*]



0E85E02X8E1

S.NO. : RN/FIIBM/410/587/22

We welcome new members to join our HJKRVSS to grow and strengthen our collective potential and power to drive change and effective action on Social Welfare, safer mobility and victim support across in India. HJKRVSS has been formed with the objective of meeting the financial needs and socio-economic development of its members. The aim of the services of these societies is to safeguard the financial interests of its members as well as to save them from harassment and exploitation by private money lenders. The objective of HJKRVSS is to provide loans and financial assistance to widows, handicapped, senior citizens, youth of India and SC, ST, OBC, EWS and minorities for starting small or large scale business at small and medium scale and for education, marriage, health etc.

**NOTE : Please read the notification before applying**

**Candidate Details :**

**Membership as :**

Member  Donor  Teacher  Student  Volunteer  Social Worker  Business Person

Name : \_\_\_\_\_

Father's Name : \_\_\_\_\_

Mother's Name : \_\_\_\_\_

Mobile No : \_\_\_\_\_

Email ID : \_\_\_\_\_

Gender [Put Right Tick] :  Male  Female  Transgender

Date of Birth(Applicant) : \_\_\_\_/\_\_\_\_/\_\_\_\_ Aadhar No. : \_\_\_\_\_

Passport size  
Photograph  
Paste Here

Signature of Applicant

**Address for Communication**

House No./ Bldg./ Apt: \_\_\_\_\_

Street/ Road/ Lane: \_\_\_\_\_

Area/ Locality/ Sector: : \_\_\_\_\_

Village/ Town/ City: \_\_\_\_\_

State : \_\_\_\_\_

District : \_\_\_\_\_

City : \_\_\_\_\_

Pin Code : \_\_\_\_\_

Nationality : \_\_\_\_\_

**Educational Qualification(Put Right Tick)**

Illiterate  Below10th  10th  12th  Graduation  Post-Graduation  M.Phil  Ph.D.

**Technical Qualification [Put Right Tick]**

ITI in Any Field  Certificate in Any Field  Diploma in Any Field  None of the Above  Others

**Self Declaration\***

I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found suppressed/false or incorrect or ineligibility being detected before or after the verification, my application is liable to be cancelled as per the provisions of the SAMITI Act, 2023 and, Regulations framed there under and other applicable Acts and Rules, etc. I further declare that I fulfill all the conditions of eligibilities. I have read the provisions of the Notice of this application carefully and I hereby undertake to abide by them. I have not submitted any other application before. I am aware that if I contravene this rule, my application will be rejected summarily by the SAMITI.

**Date\* :** \_\_\_\_\_

**Place\* :** \_\_\_\_\_



Signature of Applicant  
[Declarant\*]

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(POSTAL ADDRESS)

Send complete filled Membership Registration Form to **The Director Hindustan Jan Kalyan Rashtriya Vikas Sewa Samiti, Plot No-1488, Parliament Street, Hanuman Road Area, New Delhi, Delhi-110001, Ph. No.: 011-71468315, 011-71468316; Fax No. 011-71468315, Email ID : info@hindustanwelfare.com; contact@hindustanwelfare.com** alongwith the following documents by Registered Post:

1. ID Copy [**Self Attested**]
2. PAN Card Copy [**Self Attested**]
3. Copy of electricity or water Bill [**Self Attested**]
4. One passport size colour photograph [**Self Attested**]
5. In case of tenant Rent Agreement or Electricity or Water bill [**Attested by Landlord**]
6. A Demand Draft a sum of 1100/- Rs. in favor of Hindustan Jan Kalyan Rashtriya Vikas Sewa Samiti  
[**Note: Write your full name, Address, contact No. behind DD**]

**(A) NOTE :** Our supporting Team will contact you soon. You will be informed about your Application Status through letter/SME/Email/Telephonic Call".

**(B) NOTE :** Different States provide their natives different plan according to the following by its Govt. rules.

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**Do not write anything below the page**