Appendix 'B'

APPLICATION FORM FOR ISSUE OF AKHIL BHARTIYA POORVA SAINIK SEVA PARISHAD (ABPSSP) IDENTITY CARD

PHOTO

1. Service Number :
2. Rank :
3. Name of the Applicant :
   (Name as mentioned in the Membership Form & in Block Capitals)
4. Membership No :
5. Date of Membership :
6. State/UT/Prant :
7. Identification Mark :
8. PPO Number :
   (As per the ePPO under 7 CPC)
9. Aadhaar Card No. :
10. Any other info :

Date …… Signature of the Applicant

Note: Attach three copies (passport size) of the latest photo of the Applicant

CERTIFICATE

1. I certify that the above-mentioned details given in the Application are correct and true along with two copies of the Passport size photos of the applicant, duly self-attested by me, at the back.
2. I also undertake that in any event of my leaving the membership of Akhil Bhartiya Poorva Sainik Seva Parishad I undertake to return this card to my State/ Prant Issuing Authority.

Office Stamp/ Seal **Signature of the Applicant**

Date …… Signature of the State/ UT/ Prants General Secretary

Countersigned

For office use only at HQ ABPSSP, New Delhi

Identity Card of ABPSSP No ……. issued to the Applicant on ……(date)……and dispatched to the General Secretary of ……State/UT & Prant (concerned) on ……(date)…….. by Courier/Post /Any other Means (By Hand)

Date …… Signature of the Issuing Authority