



**Government of Jammu and Kashmir**  
**Social Welfare Department**  
**Civil Secretariat; (Jammu)**

1. Director General, Social Welfare Kashmir
2. Director General, Social Welfare Jammu

NO:-SWD/Acetts/32/2020

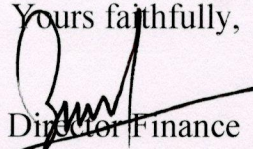
Dated:- 02-06-2020

Subject:- Application form for Integrated Social Security Scheme (ISSS).

Madam,

In pursuance to Government Order No.117-JK(SWD) of 2020 dated 29-05-2020, wherein J&K ISSS 1994 Rules issued vide Government Order No.SWD-149 of 1994 dated 30-06-1994 have been amended. The transgender people have been included as one of the category of the beneficiaries. In this connection, kindly find enclosed a modified application form for Integrated Social Security Scheme (ISSS)

Yours faithfully,

  
Director Finance

Social Welfare Department

**Copy to:-**

1. Private Secretary to Principal Secretary to Government, Social Welfare Department for information of Principal Secretary.



**Government of Jammu and Kashmir  
Social Welfare Department**

Application for sanction of Pension under  
INTEGRATED SOCIAL SECURITY SCHEME-(ISSS)

Photograph

Type of Pension

OAP

WID

PCP

Transgender  
Person

**I**

1	Name of the District	
2.	Name of the Tehsil /Panchayat/ Ward	
3.	Name of the Applicant along with Address	
4	Contact / Telephone No	
5	Name of the Father /Husband / Guardian	
6	Category : Gen/SC/OBC/ST/RBA/ALC/OTHERS	
7	Gender: Male /female/Transgender	
8	Date of Birth	
9	Aadhaar Card No	

*[Handwritten signature]*

10	Bank Account No with IFSC Code	
11	Name of the Branch (Bank)	
12	Type of disability with % age (in case of the disabled)	

## II.

### Documents Required:-

<p><b>1. <u>For Oldage Pension</u></b></p> <ul style="list-style-type: none"> <li>a. Proof of Residence (Ration Card/ Voter Card etc)</li> <li>b. Proof of Age (Date of Birth Certificate/Medical Certificate /Aadhaar card/voter card.</li> <li>c. Income Certificate (of less than Rs.75000/ per annum or BPL category)</li> <li>d. Copy of Aadhaar Card</li> <li>e. Copy of Bank Account number.</li> </ul>	<p><b>2. <u>For Widow / women in distress Pension</u></b></p> <ul style="list-style-type: none"> <li>a) Proof of Residence (Ration card/ voter card etc)</li> <li>b) Death Certificate of the husband in case of Widow</li> <li>c) Income Certificate (of less than Rs.75000/ per annum or BPL category)</li> <li>d) Copy of Aadhaar Card</li> <li>e) Copy of Bank Account number</li> </ul>
<p><b>3. <u>For Disability Pension</u></b></p> <ul style="list-style-type: none"> <li>a) Proof of Residence (Ration card/ voter card etc)</li> <li>b) Disability Certificate (40% and above) issued by Medical Board.</li> <li>c) Income Certificate (of less than Rs.75000/ per annum or BPL category)</li> <li>d) Copy of Aadhaar Card</li> <li>e) Copy of Bank Account number</li> </ul>	<p><b>4. <u>For Transgender Pension</u></b></p> <ul style="list-style-type: none"> <li>a) Proof of Residence (Ration card/ voter card etc)</li> <li>b) Income Certificate (of less than Rs.75000/ per annum or BPL category)</li> <li>c) Copy of Aadhaar Card</li> <li>d) Copy of Bank Account number</li> <li>e) Certificate from District Magistrate on Gender.</li> </ul>

*Handwritten mark*

**III.**

### **Personal Declaration**

I \_\_\_\_\_ S/O,D/O,W/O \_\_\_\_\_ R/O \_\_\_\_\_  
\_\_\_\_\_ hereby affirm  
that the above particulars furnished by me are true and correct to the best of my  
knowledge and if anything is found to the contradictory I shall be responsible.

Place:- \_\_\_\_\_

Date:- \_\_\_\_\_

\_\_\_\_\_  
Signature/Thumb Impression

### **Verification Report**

The Undersigned has verified the instant pension case and the same has been found in order / not in order. The applicant is eligible / not eligible for Pension under ISSS and, the case is accordingly recommended/not recommended to the Divisional Level Sanctioning Committee through District Social Welfare Officer for sanction of pension.

**Tehsil Social Welfare Officer**

### **Recommendation of District Social Welfare Officer**

The undersigned has accepted /not accepted the recommendation of Tehsil Social Welfare Officer for further necessary action.

**District Social Welfare Officer**