## EWFS-Form B

## Employees Welfare Fund Scheme <u>Application for Welfare Loan</u>

Ref. No.: EWFS/WL/				Date:	
2.	Name of Applicant:		Designation:	EID:	
3.			Bank A/C No		
4.	Member Office/Address:		Date of membership to EWFS		
5. Loan Type: Interest Free Welfare loan(IFWL)[ ], 10% Interest Loan [ ] {Please tick}					
6.	Documents enclosed(If any/Rele	vant):			
	6.1				
	6.2				
the terr	ms and conditions of EWFS and will	l be held accountable if fou	ine and strictly in agreement to the by and false or breach of any EWFS bye-1 WFS, I wish to apply for a welfare loar		
D	ate:			Name& Signature of the Applicant	
		(Verification by the	e Director/Regional Directors/Heads)		
The at	pove claim has been verified and fior	und that the appeal is true,	genuine and in agreement with the rul	es and procedures of EWFS.	
Date:					
			Signature	e of the Director/Regional Directors/Heads	
		(For a	official use only)		
The ab	ove claim has been verified and find	is that the appeal is true, ge	enuine and in agreement with the rules	and procedure with the rules and	
proced	ures of EWFS.				
Date: _					
Submit	tted for approval			Secretary EWFS	
<u>Presid</u> EWFS					
		(To be filled by the	e Treasurer/Cashier, EWFS)		
i.	Welfare loan Amount: Nu				
ii.	Mode of Disbursement:		_ Cheque No:		
iii.	Disbursement Voucher No.:				
iv.	Cash Book Folio No.:		_ Ledger Folio No.:		

Treasurer EWFS EWFS-Form C