APPLICATION FOR OPENING AN ACCOUNT UNDER 'SUKANYA SAMRIDDHI ACCOUNT'

To, The Po	stmaster/Manager	
Sir,		
the g	dhi Account' scheme , in the name of Kumari	ereby apply for opening an account under 'Sukanya of whom I am in cription.
1. 2. 3.	Name of Account holder (girl child) Ku. Daughter of (father /mother's name) Date of Birth	(DD / MM / YYYY)
	(In words)	
4.	Details of Birth Certificate (copy may please be enclosed) a) Certificate No. b) Date OF Issue c) issuing authority)	
5.	Name of Parent / Guardian (Operating the account on behalf of the minor girl child)	
6.	ID details of parent/guardian (copy may please be enclosed) a) Certificate No. b) Date OF Issue c) issuing authority	
7.	Address (Present)	
	(Permanent)	
8.	Details of other KYC documents attached	
issued	I hereby undertake to abide by the provisions / rule	es of the 'Sukanya Samriddhi Account' and amendments
name o	I hereby declare that I have not opened OR mainta f(Name of girl child) in any ot	nining any other account under the same scheme in the her Post Office or Bank.
		Signature or thumb impression of Parent/guardian
		Additional Specimen signatures
	For use of Post	Office/Bank
	e account has been opened in the name o	of Ku on with ecount' scheme
		Signature and seal of competent authority.