HDFC MUTUAL FUND
BHAROSA APNO KA

Application Form (Except for ETFs, HDFC Retirement Savings Fund and HDFC Children's Fund)

Investors must read the Key Information Memorandum, the instructions and Product Labeling on page 183 to 186 before completing this Form.
The Application Form should be completed in English and in **BLOCK LETTERS** only.

KEY PARTNER / AGENT INFORMATION (Investors applying under Direct Plan must mention "Direct" in ARN column.) (Refer Instruction 1)

ARN/RIA Code/Stock Broker/ Portfolio Manager Registration Number (PMRN)	ARN/RIA/Portfolio Manager's/ Stock Broker's Name	Sub Agent's ARN	Bank Branch Code	Internal Code for Sub-Agent/ Employee	Employee Unique Identification Number (EUIN)
ARN-95070					E-101834

FOR OFFICE USE ONLY (TIME STAMP) | **CAMS bar code**

EUIN Declaration (only where EUIN box is left blank) (Refer Instruction 1)
I/We hereby confirm that the EUIN box has been intentionally left blank by me/us as this transaction is executed without any interaction or advice by the employee/relationship manager/sales person of the above distributor/sub broker or notwithstanding the advice of in-appropriateness, if any, provided by the employee/relationship manager/sales person of the distributor/sub broker.

SIGN

First/ Sole Applicant/ Guardian/ PoA Holder	Second Applicant	Third Applicant

1. EXISTING UNIT HOLDER INFORMATION (IF YOU HAVE EXISTING FOLIO, PLEASE FILL IN SECTIONS viz. 1, 6, 7, 9 AND 13 ONLY. Refer instruction 2).

Folio No. / **The details in our records under the folio number mentioned alongside will apply for this application.**

2. MODE OF HOLDING [Please tick (✓)]

☐ Single ☐ Joint (Default) ☐ Anyone or Survivor

3. UNIT HOLDER INFORMATION (Refer instruction 3)

DATE OF BIRTH@/DATE OF INCORPORATION (D D M M Y Y Y Y) Proof of date of birth@ **Please (✓)** ☐ Attached

NAME OF FIRST / SOLE APPLICANT (In case of Minor, there shall be no joint holders) (Name of the unitholder needs to as per PAN records(all unitholder)

Mr. Ms. M/s.

Nationality PAN#/ PEKRN#

KYC Number **KYC #** **[Please tick (✓)] (Mandatory)** ☐ Proof Attached

NAME OF GUARDIAN (in case of First / Sole Applicant is a Minor) / NAME OF CONTACT PERSON - DESIGNATION (in case of non-individual Investors)

Mr. Ms.

Nationality Designation Contact No.

PAN#/ PEKRN# **DATE OF BIRTH** (D D M M Y Y Y Y)

KYC Number **KYC #** **[Please tick (✓)] (Mandatory)** ☐ Proof Attached

Relationship with Minor@ Please (✓) ☐ Father ☐ Mother ☐ Court appointed Legal Guardian Proof of relationship with minor@ Please (✓) ☐ Attached @ Mandatory Refer instruction 4c

CONTACT DETAILS OF FIRST / SOLE APPLICANT Country Code - Mobile

STD Code Res. Telephone No. Office

eAlerts Mobile eDocs Email of First / Sole holder ^ IN CAPITALS

This mobile number belongs to (Mandatory Please ✓): ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian ☐ POA ☐ Custodian (for FPIs only) ☐ PMS

This email id belongs to (Mandatory Please ✓): ☐ Self ☐ Spouse ☐ Dependent Children ☐ Dependent Siblings ☐ Dependent Parents ☐ Guardian ☐ POA ☐ Custodian (for FPIs only) ☐ PMS

☐ **I hereby declare that I shall immediately notify any change to the mobile number/ email id. (Refer instruction 8)**

☐ **I/ We would like to register for online access to transact on HDFCMFOnline Investors as per the terms & conditions displayed on website: www.hdfcfund.com (Email id mandatory) (only for non individuals and individuals with mode of holding as 'Joint'). Refer Instruction 11.**

^ On providing email-id investors shall receive the scheme wise annual report or an abridged summary thereof/ account statements/ statutory and other documents by email. However, if the investors wish to receive physical copy of the scheme wise annual report or an abridged summary thereof [Please tick (✓)] Opt-in ☐ (Refer Instruction 8)

MAILING ADDRESS OF FIRST / SOLE APPLICANT (Mandatory) (Refer Instruction 3a)

CITY STATE PIN CODE

OVERSEAS ADDRESS (Mandatory in case of NRIs /FIIs/PIOs/ OCIs) (P. O. Box Address may not be sufficient)

CITY

STATE COUNTRY PIN CODE

KYC Details

Status of First/ Sole Applicant [Please tick (✓)] ☐ **Individual** ☐ **Non - Individual*** ***[Please attach FATCA, CRS & Ultimate Beneficial Ownership (UBO) Self Certification Form] (Mandatory) (Refer Instruction 3 & 17)***

☐ Resident Individual ☐ Partnership ☐ Trust ☐ HUF ☐ AOP ☐ PIO ☐ Pvt. Ltd. Company ☐ Public Ltd. Company ☐ Minor through guardian ☐ BOI ☐ OCI ☐ Body Corporate ☐ LLP

☐ Society/Club ☐ NRI-Repatriation ☐ NRI-Non Repatriation ☐ Foreign National Resident in India ☐ FPI ☐ Sole Proprietorship ☐ Non Profit Organisation ☐ Others (please specify)

LEI No. **Expiry Date:** (DD MM YYYY)

(Mandatory for Non - Individuals transacting / proposing to transact for an amount of Rs. 50 crores or more)

* Trust/Societies/Section 8 companies to give below declaration

We are a **"Non-Profit Organization" [NPO]** which has been constituted for religious or charitable purposes referred to in clause (15) of section 2 of the Income-tax Act, 1961 (43 of 1961), and is registered as a trust or a society under the Societies Registration Act, 1860 (21 of 1860) or any similar State legislation or a Company registered under the section 8 of the Companies Act, 2013 (18 of 2013).	☐ **YES** ☐ **NO**
If yes, please quote Registration No. of Darpan portal of Niti Aayog. *(If not registered already, please register immediately and confirm with the above information)*	

Occupation Details [Please tick (✓)] ☐ Private Sector Service ☐ Public Sector Service ☐ Government Service ☐ Business ☐ Professional ☐ Agriculturist ☐ Retired ☐ Housewife ☐ Student ☐ Proprietorship ☐ Others (Please specify) _____

Gross Annual Income in Rs. [Please tick (✓)] ☐ Below 1 lac ☐ 1-5 lac ☐ 5-10 lac ☐ 10-25 lac ☐ 25 lac- 1 cr ☐ > 1 cr

OR Networth in Rs. (Mandatory for Non Individual) as on (D D M M Y Y Y Y) (not older than 1 year)

For Individual [Please tick (✓)] ☐ I am Politically Exposed Person ☐ I am Related to Politically Exposed Person ☐ Not Applicable

 # Please attach Proof. Refer instruction No 14 for PAN/PEKRN and No 16a for KYC (KRA). Refer instruction No 16b for KYC Identification Number issued by CKYCR.

May 2025

ACKNOWLEDGEMENT SLIP (To be filled in by the Investor) [For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

Date :

HDFC MUTUAL FUND

Head Office : HDFC House, 2nd Floor, H.T. Parekh Marg,165-166, Backbay Reclamation, Churchgate, Mumbai - 400 020.

Received from Mr. / Ms. / M/s. _____

an application for Purchase of Units of the Scheme(s) alongwith Cheque / Payment Instrument as detailed overleaf.

ISC Stamp & Signature

[For any queries please contact our nearest Investor Service Centre or call us at our Customer Service Number 1800 3010 6767 / 1800 419 7676 (Toll Free)]

e-mail us at: hello@hdfcfund.com or **visit our website: www.hdfcfund.com** **Missed Call Number - +91 85069 36767**

... continued overleaf

4. JOINT APPLICANT DETAILS, If any (Refer instruction 3) (In case of Minor, there shall be no joint holders)

1. NAME OF SECOND APPLICANT **DATE OF BIRTH** D D M M Y Y Y Y

Mr. Ms. M/s.

Nationality PAN#/ PEKRN#

KYC Number **KYC #** **[Please tick (✓)] (Mandatory)** Proof Attached

Occupation Details [Please tick (✓)] Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife
Student Proprietorship Others (Please specify) _____

Gross Annual Income in Rs. [Please tick (✓)] Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac- 1 cr > 1 cr

For Individual [Please tick (✓)] I am Politically Exposed Person I am Related to Politically Exposed Person Not Applicable

CONTACT DETAILS OF SECOND APPLICANT

eAlerts Mobile eDocs Email of First / Sole holder^ IN CAPITALS

This mobile number belongs to (Mandatory Please ✓): Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian POA Custodian (for FPIs only) PMS
This email id belongs to (Mandatory Please ✓): Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian POA Custodian (for FPIs only) PMS

2. NAME OF THIRD APPLICANT **DATE OF BIRTH** D D M M Y Y Y Y

Mr. Ms. M/s.

Nationality PAN#/ PEKRN#

KYC Number **KYC #** **[Please tick (✓)] (Mandatory)** Proof Attached

Occupation Details [Please tick (✓)] Private Sector Service Public Sector Service Government Service Business Professional Agriculturist Retired Housewife
Student Proprietorship Others (Please specify) _____

Gross Annual Income in Rs. [Please tick (✓)] Below 1 lac 1-5 lac 5-10 lac 10-25 lac 25 lac- 1 cr > 1 cr

For Individual [Please tick (✓)] I am Politically Exposed Person I am Related to Politically Exposed Person Not Applicable

CONTACT DETAILS OF THIRD APPLICANT

eAlerts Mobile eDocs Email of First / Sole holder^ IN CAPITALS

This mobile number belongs to (Mandatory Please ✓): Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian POA Custodian (for FPIs only) PMS
This email id belongs to (Mandatory Please ✓): Self Spouse Dependent Children Dependent Siblings Dependent Parents Guardian POA Custodian (for FPIs only) PMS

5. POWER OF ATTORNEY (PoA) HOLDER DETAILS

Name of PoA Mr. Ms. M/s.

PAN#/ PEKRN#

KYC Number **KYC #** **[Please tick (✓)] (Mandatory)** Proof Attached

eAlerts Mobile eDocs Email of PoA holder^ IN CAPITALS

 # Please attach Proof. Refer instruction No 14 for PAN/PEKRN and No 16a for KYC (KRA). Refer instruction No 16b for KYC Identification Number issued by CKYCR.

6. FATCA AND CRS INFORMATION (for Individual including Sole Proprietor) (Self Certification) (Refer instruction 3)

The below information is required for all applicant(s)/ guardian

Address Type: **Residential or Business** **Residential** **Business** **Registered Office (for address mentioned in form/existing address appearing in Folio)**

Category	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
Place/ City of Birth			
Country of Birth			
Country of Tax Residency#			

Is the applicant(s)/guardian's Country of Birth/Citizenship/ Nationality/Tax Residency other than India? Please indicate all countries in which you are resident for tax purposes and the associated Tax Reference Numbers below*.	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
	Yes No	Yes No	Yes No

Mandatory

If Yes, please provide the following information [mandatory]

Category	First Applicant/Guardian in case of Minor	Second Applicant/ Guardian	Third Applicant
Tax Payer Ref. ID No ^			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 2			
Tax Payer Ref. ID No. 2			
Identification Type [TIN or other, please specify]			
Country of Tax Residency 3			
Tax Payer Ref. ID No. 3			
Identification Type [TIN or other, please specify]			

#To also include USA, where the individual is a citizen/ green card holder of USA. ^ In case Tax Identification Number is not available, kindly provide its functional equivalent.

7. UNIT HOLDING OPTION **DEMAT MODE* (Enclose Latest Client Master / Demat Account Statement)** **PHYSICAL MODE (Default)** **(refer instruction 11)**

*Demat Account details are mandatory for (i) FPIs and (ii) investors who wish to hold the units in Demat Mode (Account statement (CAS) for units held in demat mode will be issued only by NSDL/CDSL)

NSDL	**DP Name** _____	**DP ID**	I N	**Beneficiary Account No.**
CDSL	**DP Name** _____			**Beneficiary Account No.**

May 2025

Particulars			
Scheme Name / Plan / Option / Sub-option / Payout Option	Cheque / Payment Instrument / UTR No. / Date	Drawn on (Name of Bank and Branch)	Amount in figures (Rs.)

Please Note: All Purchases are subject to realisation of cheques / Payment Instrument.

8. INVESTMENTS & PAYMENT DETAILS [Please (✓)] **(refer instruction 5 & 6 for Scheme details and instruction 7 & 9 for Payment Details)** The name of the first/ sole applicant must be pre-printed on the cheque.

Sr No.	Name of the Schemes	Plan	Option	Sub-Option for IDCW	Investment Amount (Rupees)
1	**HDFC**	☐ Regular ☐ Direct	☐ Growth ☐ IDCW ^	☐ Payout ☐ Reinvestment	
2	**HDFC**	☐ Regular ☐ Direct	☐ Growth ☐ IDCW ^	☐ Payout ☐ Reinvestment	
3	**HDFC**	☐ Regular ☐ Direct	☐ Growth ☐ IDCW ^	☐ Payout ☐ Reinvestment	
	In case of multiple schemes, Cheque should be drawn in favour of "HDFC MF LUMP SUM COLLECTION A/C" and the cheque amount should match with the total Investment amount mentioned here.			**Total Amount**	

Mode of Payment ☐ Cheque ☐ NEFT/ RTGS/ Fund Transfer ☐ One Time Mandate (OTM)*

Sr No.	Cheque/NEFT/RTGS/UTR no.	Date of Cheque/NEFT/ RTGS/Fund Transfer	Amount of Cheque/ NEFT/RTGS/ Fund Transfer	Drawn on Bank & Branch	Bank Account No. (For Cheque/NEFT/RTGS/OTM)
1					
2					
3					

***Please note that OTM can be selected as mode of payment provided OTM is already registered. In case OTM is not registered please fill in the attached OTM Debit Mandate to make future transactions via OTM.** ^ **The amounts can be distributed out of investor's capital (Equalization Reserve), which is part of sale price that represents realized gains.**

9. BANK ACCOUNT DETAILS OF THE FIRST / SOLE APPLICANT (For redemption/ IDCW Payments if any) **(refer instruction 4)**
(Mandatory to attach proof, in case the pay-out bank account is different from the bank account mentioned under Section 8 above.)

For unit holders opting to hold units in demat form, please ensure that the bank account linked with the demat account is mentioned here.

Mandatory

Bank Name

Branch Name | Bank City

Account Number | Account Type (Please ✓) ☐ Savings ☐ Current ☐ NRO ☐ NRE ☐ FCNR ☐ Others (please specify)

IFSC Code*** | *** Refer Instruction 5C (Mandatory for Credit via NEFT / RTGS) (11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with your bank)

10. MODE OF PAYMENT OF REDEMPTION / IDCW PROCEEDS (refer instruction 9) **The redemption / IDCW proceeds will be directly credited to the investor's bank account.**

11. NOMINATION FOR UNITS IN NON-DEMAT MODE Please refer to instruction no. 13 (Nomination is mandatory for all folios held Singly)

☐ I/We wish to make a nomination. [As per details given below] **OR** ☐ I / We hereby confirm that I / We do not wish to appoint any nominee(s) for my mutual fund units held in my / our mutual fund folio and understand the implications / issues involved in non-appointment of any nominee(s) and am/ are further aware that in case of my demise / death of all the unit holders in the folio, my / our legal heir(s) would need to submit all the requisite documents issued by the Court or such other competent authority, as may be required by the Mutual Fund / AMC for settlement of death claim / transmission of units in favour of the legal heir(s), based on the value of the units held in the mutual fund folio/s.

I/We wish to make a nomination and do hereby nominate the following person(s) in the above specified folio(s) who shall receive all the assets held in my / our account/ folio in the event of my / our demise, as trustee and on behalf of my/ our legal heir(s)*. This nomination shall supersede any prior nomination made by us/me if any.

Nomination can be made upto three nominees in the account.		**Details of 1st Nominee**	**Details of 2nd Nominee**	**Details of 3rd Nominee**
		Mandatory information		
1	**Name of the nominee(s) (Mr./Ms.)**			
2	**Share of each Nominee#**	%	%	%
3	**Date of Birth (for Minor)**	D D M M Y Y Y Y	D D M M Y Y Y Y	D D M M Y Y Y Y
4	**Relationship with the Applicant (select one)**	☐ Spouse ☐ Father ☐ Mother ☐ Daughter ☐ Son Others (please specify)	☐ Spouse ☐ Father ☐ Mother ☐ Daughter ☐ Son Others (please specify)	☐ Spouse ☐ Father ☐ Mother ☐ Daughter ☐ Son Others (please specify)
5	**Nominee/ Guardian (in case of Minor) Identification details** *[Please tick any one of the following and provide ID Number and no copies required].*	☐ PAN ☐ Aadhaar (masked last 4 digits) **** **** ☐ Passport (for NRIs/OCIs/PIOs) ☐ Driving License	☐ PAN ☐ Aadhaar (masked last 4 digits) **** **** ☐ Passport (for NRIs/OCIs/PIOs) ☐ Driving License	☐ PAN ☐ Aadhaar (masked last 4 digits) **** **** ☐ Passport (for NRIs/OCIs/PIOs) ☐ Driving License
6	**Address of Nominee(s)/ Guardian in case of Minor** [Tick ✓ if same as First Applicant, or provide the complete address if different] City / Place: State & Country	☐ Same as First Applicant **Pincode:**	☐ Same as First Applicant **Pincode:**	☐ Same as First Applicant **Pincode:**

11. NOMINATION FOR UNITS IN NON-DEMAT MODE Please refer to instruction no. 13 (Nomination is mandatory for all folios held Singly) *(Contd...)*

7	**Mobile of nominee(s)/ Guardian in case of Minor**			
8	**Email ID of nominee(s)/ Guardian in case of Minor**			
	Non-mandatory details			
9	**Nominee Guardian Name (in case Nominee is Minor)**			

I / We want the details of my / our nominee to be printed in the statement of holding or statement of account, provided to me/ us by the AMC / DP as follows; (please tick, as appropriate)

☐ Name of nominee(s) with % ☐ Nomination: Yes / No (Default)

This nomination shall supersede any prior nomination made by the account holder(s), if any

Signature(s) – As per mode of holding in demat accounts / MF Folio(s).		
	Name of the Holder	**Signature / Thumb Impression***
Sole / First Holder (Mr./Ms.)	Name: Witness 1 Name & Address: Witness 2 Name & Address:	Signature /Thumb Impression: Witness 1 Signature: Witness 2 Signature:
Second Holder (Mr./Ms.)	Name: Witness 1 Name & Address: Witness 2 Name & Address:	Signature /Thumb Impression: Witness 1 Signature: Witness 2 Signature:
Third Holder (Mr./Ms.)	Name: Witness 1 Name & Address: Witness 2 Name & Address:	Signature /Thumb Impression: Witness 1 Signature: Witness 2 Signature:

** Signature of witness, along with name and address are required, if the account holder affixes thumb impression, instead of signature.*

If % is not specified, then the assets shall be distributed equally among all the nominees. # Any odd lot after division shall be assigned / transferred to the first nominee mentioned in the form.

Note: *The Intermediary shall provide acknowledgement of the nomination form to the account holder(s)*

12. RESOLUTION OF DISPUTES (For Institutional or corporate clients) (Refer instruction 19)

☐ Smart ODR **OR** ☐ by harnessing any independent institutional mediation, conciliation and/or online arbitration institution in India

13. DECLARATION & SIGNATURE/S (refer instruction 12)

I / We have read, understood the terms and conditions of the scheme related documents and the addendum issued therein till date, Key Information Memorandum of the Schemes as well as the rules and regulations of SEBI, AMFI, Prevention of Money Laundering Act, 2002 and such other regulations as may be applicable to me/us from time to time and agree to comply with the same as a Unitholder. I /We hereby apply to the Trustees for allotment of Units of the Scheme(s) of HDFC Mutual Fund ('Fund') and confirm and declare as under:

(a) I/We am/are eligible Investor(s) as per the scheme related documents and not prohibited from accessing capital markets by any order/ruling / judgment etc. passed by SEBI/ Statutory Authority or Courts in India and Foreign laws. I am/We are authorised to make this investment as per the Constitutive documents/ authorization(s). The amount invested in the Scheme(s) is through legitimate sources only and is not for the purpose of contravention and/or evasion of any act, rules, regulations, notifications or directions issued by any regulatory authority in India.

(b) I / We will be bound by the Fund's terms and conditions as amended from time to time.

(c) The information given by me /us in or along with this application form is true and correct and I/we shall furnish such other further/additional information as may be required by the HDFC Asset Management Company Limited (AMC)/ Fund. I/We undertake to promptly inform the AMC / Fund/Registrars and Transfer Agent (RTA) in writing about any change in the information furnished by me/us from time to time.

(d) I/We hereby authorize you to disclose, share, remit in any form/manner/mode the above information and/or any part of it including the changes/updates that may be provided by me/us to the Fund, its Sponsor/s, Trustees, Asset Management Company, its employees, agents and third party service providers, SEBI registered intermediaries for single updation/ submission, any Indian or foreign statutory, regulatory, judicial, quasijudicial authorities/agencies including but not limited to Financial Intelligence Unit-India (FIU-IND) etc without any intimation/advice to me/us.

(e) I/We hereby consent for providing transactions data feed, portfolio holdings, NAV etc. in respect of my/our transactions under Direct Plan to the RIA/Portfolio Managers/ Stock Broker registered in the concerned folio, if applicable.

(f) I/We shall be liable and responsible for any loss, claims suffered, directly or indirectly by AMC/ Fund/ RTA/ SEBI Intermediaries, arising out of any false, misleading, inaccurate and incomplete information furnished by me/us at the time or investing/redeeming the units. I/We hereby unconditionally and irrevocably indemnify and at all time keep indemnified, save and harmless AMC/Fund/Trustee and their officers, directors and employees against all actions, proceedings, claims, losses, damages, charges and expenses incurred or suffered /paid by AMC/Fund in this regard and in case of any dispute regarding the eligibility, validity and authorization of my/our transactions.

(g) The ARN holder (AMFI registered Distributor) has disclosed to me/us all the commissions (in the form of trail commission or any other mode), payable to him/them for the different competing Schemes of various Mutual Funds from amongst which the Scheme is being recommended to me/us.

(h) I/WE HEREBY CONFIRM THAT I/WE HAVE NOT BEEN OFFERED/ COMMUNICATED ANY INDICATIVE PORTFOLIO AND/ OR ANY INDICATIVE YIELD BY THE FUND/AMC/ITS DISTRIBUTOR FOR THIS INVESTMENT.

Consent for Telemarketing (Refer Instruction 18):

I/We hereby accord my/our consent to HDFC AMC for receiving the promotional information/ material via email, SMS, telemarketing calls etc. on the mobile number and email provided by me/us in this Application Form.

Consent for disclosure of Personal Information in terms of Privacy Policy

I/We hereby confirm to have read, understood and agree to the terms of Privacy Policy (available on https://www.hdfcfund.com) ("Policy") of HDFC AMC/ Fund.

I/We hereby accord my/our consent to HDFC AMC/Fund for collecting, receiving, possessing, storing, dealing, handling or disclosure of my/ our Personal Data and hereby authorize to disclose it to the third party or another body corporate or any person acting under a lawful contract with HDFC AMC, in accordance with the Privacy Policy.

For Foreign Nationals Resident in India only:

I/We will redeem my/our entire investment/s before I/We change my/our Indian residency status. I/We shall be fully liable for all consequences (including taxation) arising out of the failure to redeem on account of change in residential status.

For NRIs/ PIO/ OCIs/ FPIs only:

I/We confirm that my application is in compliance with applicable Indian and foreign laws.

For NRIs/ PIO/OCIs Please (✓) ☐ Repatriation basis ☐ Non-repatriation basis

SIGN HERE (Please write Application Form No. / Folio No. on the reverse of the Cheque / Payment Instrument.)	× First/ Sole Applicant/ Guardian/ PoA Holder	Second Applicant	Third Applicant