

Part 1

Who you are ? :*	First Name :*	Middle Name :
<input type="text" value="-- Select Category --"/>	<input type="text"/>	<input type="text"/>
Surname :	Service Number of ESM :*	Do you have an Existing ESM Id Card ? :
<input type="text"/>	<input type="text"/>	<input type="radio"/> Yes <input checked="" type="radio"/> No
Type of Service of ESM :*	Rank of ESM :*	Concerned RSB :*
<input type="text" value="-- Select Type of Service --"/>	<input type="text"/>	<input type="text" value="-- Select RSB --"/>
Aadhar Card Number :*	Date of Birth :*	Date of Enrollment :*
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Discharge :*	Date of Death of ESM (if applicable):	Father's Name/Husband's Name :
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Id :*	Mobile No. :*	
<input type="text"/>	<input type="text"/>	

Part 2

House No. :*	Street No. & Name :*	Town :
<input type="text"/>	<input type="text"/>	<input type="text"/>
Village :	City :	State :*
<input type="text"/>	<input type="text"/>	<input type="text" value="-- Select State --"/>
District :*	Country :*	Pin Code :*
<input type="text" value="-- Select District --"/>	<input type="text" value="India"/>	<input type="text"/>
Is your bank account number linked with aadhar card number? <input type="checkbox"/>		
Name Of Bank Account Holder :*	Bank Name :*	Branch Name :*
<input type="text"/>	<input type="text" value="-- Select --"/>	<input type="text"/>
Account No. :* (Kindly enter your bank account number which is linked with aadhar to ensure correct payment)		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
IFSC Code :*	Pensioner/Non Pensioner :*	
<input type="text"/> <input type="text"/>	<input type="text" value="-- Select --"/>	