

**PROFORMA OF CLAIMANT ENTRY**

NAME OF CIRCLE	NAME OF SCHOOL	DISE CODE	NAME OF TEACHER	EMPLOYEE CODE	DATE OF DEATH	NAME OF CLAIMANT	CLAIMANT MOBILE NO	CLAIMANT EMAIL ID	CLAIMANT RELATION

**DOCUMENTS REQUIRED :-**

- 1 TEACHER'S DEATH CERTIFICATE
- 2 CLAIMANT'S LEGAL HEIR CERTIFICATE
- 3 CLAIMANT'S GOVT. ID PROFF
- 4 CLAIMANT'S APPLICATION WITH SI/S FORWARDING WITH MEMO NO
- 5 FORWARDING LETTER OF SI/S WITH MENTION ABOVE 10 POINTS WHICH WRITTEN IN THE EXCEL SHEET