



Department of Information and Publicity
Government of Goa
Udyog Bhavan, 3rd Floor, Panaji, Goa, Pin 403 001, India
Telephones: 2223157 / 2422675 / 2226047 / Fax: 2224211
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ANNEXURE - I

Application form for financial assistance (Pension) under Goa State Working Journalist welfare scheme

1. Name in full and address of the applicant:
2. Details of applicant where the applicant was working:
3. Age and date of birth of the applicant:
4. Residence certificate: (15 years residence certificate from concerned taluka Mamlatdar)
5. Aadhaar card No.:
6. Name of job:
7. The date of entry into service and details of total service:
8. Details of service(s) in newspaper/ Media organizations:
9. Recommendation letter from GUJ (18 years as GUJ Member)
10. The name and address and the relationship of the nominee who will receive the family welfare in the event of the death of the journalist:

Signature of the applicant

Place :

Date :

Note : Attested copy to prove the date of birth and Aadhaar card copy are to be enclosed.

ANNEXURE – II

Application form for granting welfare under the Goa Journalists Welfare
Fund Scheme

1. Name of the applicant :
2. Age and date of birth :
3. Full address :
4. The name and address of the Media organization where last retired:
5. Name of the job :
6. Date of entry into service :
7. Date of superannuation:

Certified that all the details given above are true to the best of my knowledge.

Signature of the applicant

Place:

Date :

Note : Attested copy as proof of the date of birth to be enclosed.

ANNEXURE –III

The Goa Journalists Welfare Fund Scheme

Report to be furnished by the newspaper organization (as per official record maintained in media house)

I am submitting the report after considering necessary enquiry on the details furnished by Shri/Smt/Ms..... in his/her application form.

1. Name of applicant:
2. Name of Media House(establishment):
3. Date of joining Service:
4. Date of Birth:
5. He is working Journalist for a period of
6. As per documents (please specify) submitted by the applicant, his/her age is
7. Other details furnished by the applicant are true/not true
8. He is working in our Media House as Journalist for a period of
9. Any other remarks.

Signature

Name:

Address:

Office Seal:

Place:

Date:

ANNEXURE –IV

The Goa Journalists Welfare Fund Scheme

Report to be furnished by the newspaper organization (as per official record maintained in media house) / or in case Newspaper shutdown/ close the details may be furnished by President/ General Secretary of the Goa Union of Journalists (GUJ)

I am submitting the report after considering necessary enquiry on the details furnished by Shri/Smt/Ms..... in his/her application form.

1. Name of applicant:
2. Date of registration as Member of GUJ
3. The applicant comes under the purview of the Goa Journalist Welfare Fund Scheme.
4. He is working Journalist for a period of
5. As per documents (please specify) submitted by the applicant, his/her age is
6. Other details furnished by the applicant are true/not true
7. He is a member of GUJ for a period of
8. Any other remarks.

Signature

Name:

Address:

Office Seal:

Place:

Date:



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APPLICATION FORM-A

**FOR GRANT OF E BIKES UNDER “SUBSIDY TO PURCHASE
EBIKE FOR JOURNALISTS”**

**(Applicable only to the Journalists who have completed 8 years
experience).**

Registration No: _____

1. Name of Journalist :
2. Permanent Postal Address :
and Telephone No/Contact No
3. 15 years Domicile certificate :
from Mamlatdar of the Taluka
he/she resides
4. Valid Driving License No:
5. Age Proof:
6. Name of registered media :
Organization employed with
designation.
7. Address of organization
8. Mobile No.
9. Whether working Journalist/with evidence:

10. No of years in service in organization
(Evidence from Editor/Management to be enclosed)

11. Produce latest payslip from organization :

Date:
Place:

Signature

The Proforma duly filled with relevant documents should be submitted to Director, Department of Information and Publicity, Udyog Bhavan, 3rd floor, Panaji

Note:- 1) Produce two passport size photographs

2) The type and cost of the E bike to be granted will be decided by the Government.

DECLARATION

I, Shri/Smt. working
as resident of hereby declare that I
have applied for..... under E-Bikes.

I further declare that I have availed / not availed of similar benefits
under any of the scheme of the Department of Information & publicity.

Sign:.....

Name:

Date:

Place:



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APPLICATION FORM A

FOR GRANT OF COMPUTER / CAMERA UNDER ASSISTANCE OF PURCHASE OF LAPTOP/ CAMERA/SMARTPHONE FOR JOURNALISTS, 2021'.

(Applicable only to the Journalists who have completed 8 years experience or Photo-Journalists who have completed 8 years experience).

1	Name of Journalist/Photo Journalist	
2	Permanent Postal Address and Mobile No/ Contact No	
3	15 years Domicile certificate from Mamlatdar of the Taluka he/she resides (Residence Certificate)	
4	Name of registered media organization employed with designation	
5	Address of organization	
6	Telephone No of organization	
7	Whether working Journalist/Photo Journalist with evidence	
8	No of years in service in organization (Evidence from Management to be enclosed)	
9	Produce latest pay slip from organization	

10	Applied for Laptop /i-pad/note-book/PC/tablet/Camera/Smart Phones	
11.	If the scheme was availed earlier, then the year in which the scheme was applied	
12	Age Proof	

Date:

Signature

Place:

The proforma duly filled with relevant documents should be submitted to Director, Department of Information and Publicity, Udyog Bhavan, 3rdfloor, Panaji.

Note:-

- 1) Produce two passport size photographs.
- 2) The type and cost of the laptop/i-pad/note-book/PC/tablet/camera/SmartPhone to be granted will be decided by the Government.

DECLARATION

I, Shri/Smt. working as
.....resident of hereby declare that I have
applied for..... under Goa Scheme for Assistance for Purchase of
Laptop/Camera/Smartphone for Journalists, 2021.

I further declare that I shall take full responsibility for the maintenance of
the computer/laptop/camera/tablet/smart phones and the Government/
Department will not be responsible for any servicing/ maintenance/ repair.

I further declare that I have availed / not availed of similar benefits in the
year _____ under any of the scheme of the Department of Information &
Publicity.

Sign

Name:



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PATRAKAR KRITADNYATA NIDHI

APPLICATION FORM

Photo of
applicant to
be attested by
a Gazetted
Officer

1. Name of applicant (In Capital): _____
2. Permanent Residential Address : _____

3. Telephone No.(if any) : _____ Mobile No: _____
4. Date of Birth/Age : _____
(Birth Certificate (Attested copy to be attached))
5. Field of Journalism : _____
6. Name of the Organization presently working: _____

7. Particulars of Significant work done in the field of Journalism (testimonials
in proof of the outstanding work done to be attached, if required a
separate sheet may be attached:

8. Previous work experience: _____(Attach proof)

9. Annual income from all sources: Rs. _____ per a

10. Details of number of persons wholly dependent on the applicant:

Name	Age	Relationship with applicant	Marital status	Occupation	Income per month
1	2	3	4	5	6

11. Whether the Applicant is in receipt of any award in the field of Journalism:

12. Recommendation from two persons/institutions who have technical knowledge of the applicants work and who will be in position to justify the work done.

(Recommendation letter to be attached)

Sr. No.	Name & Address	Telephone	Signature
1.			
2.			

13. Amount of Financial Assistance required: _____

14. Any other relevant information:

I, solemnly declare that the information furnished herein is correct to the best of my knowledge. In case of any false statement made by me herein above, I give an undertaking to the Government to refund the amount if any received by me. I will abide by all the terms and conditions of the Department related to the scheme if the assistance is conferred on me.

Signature & Name of the applicant/journalist

Date:

Place: