Photo(3x3 cms with 75% area covered with image of the face) front attested by sponsoring Authority to be pasted

## FORM-A

For officials of Central Govt / State Governments / UT Administrations and their attached / Subordinate offices and Undertakings/ Autonomous Bodies owned or controlled by them.

Photo (3x3 cms with 75% area covered with image of the face) to be pasted here (Not to be attested.)

(Signature of the Applicant in the box above)

## PART-1

	(10 be filled	by Applicant)		
01.	Type of Identity Card	Category of Employee  Regular/Casual/ Departmental Employee/		
	(i) Central Government			
		Service Personnel		
	(ii) State Govt/ UT Administration.	Regular/Casual/ Departmental Employee/ Service Personnel		
	(iii) Corporation/ Undertaking/	Regular/Casual/ Departmental Employee/		
	Autonomous Body	Service Personnel		
02.	Name of the Applicant			
	(IN CAPITAL LETTERS)			
03.	Designation			
04.	Pay Scale/Pay Band			
05.	Grade Pay (wherever applicable)			
06.	(a) Ministry/ State Government			
	(b) Department/ Public Undertaking			
07.	Blood Group			
08.	Address of Place of Working			
09.	Date of Birth			
10.	Telephone Numbers: OFF:	RES:		
11.	Father's / Husband's Name			
12.	Date of Superannuation			
13.	Mark of Identification			
14.	Gazetted/ Non-Gazetted			
15.	Reasons for Issue			
	(i) Renewal	(ii) Loss/Mutilation		
	(iii) Change in designation	(iv) Fresh appointment		
	(v) Transfer	(vi) Any other (specify)		
	1. Certified that the aforesaid information	is correct. 2. The old Identity card No		

1. Certified that the aforesaid information is correct. 2. I	The old Identity card No. ——
dated is hereby enclosed or the old	
matter has been reported to the Police vide receipt No.	
enclosed. (Delete whichever is inapplicable).	
	A constitution of

Signature of	the Applicant	
0		

D	ate	:	

## PART-II

(To be certified by the Sponsoring Authority)

(i) The information furnished by the applicant has been verified to be correct and has been entered in the register in Form 'A' maintained for this purpose; (ii) The good conduct certificate is enclosed (in case of photo passes for casual labour / daily wagers); (iii) I am the authorised sponsoring authority for issue of photo passes for the Ministry / Department (iv) Duplicate copy of the requisition has been kept in the folder for records; (v) Approval of the competent authorities has been obtained. (DELETE WHICH-EVER IS INAPPLICABLE)

TYPE	COVERAGE OF BUILDING	PERIOD
(i)	OPEN for all Buildings under MHA Security Zone	5/1 Year
(ii)	Restricted for [Specify name(s) of the building(s)]: (1) (2)	5/1 Year
(iii)	Reason (Fresh / Renewal/ Loss/ Change in Designation / Transfer)	

Secret Seal of the Ministry / Department

Name and Signature of the Sponsoring Authority

Designation (Stamp with Telephone No	).)
Code No.	

## MHA (SSO-PASS CELL) RETURNED IN ORIGINAL WITH REMARKS THAT-

- 1. The requisition form is incomplete (Sl. No. \_\_\_\_\_\_ of Part-I)
- 2. Part-II of the requisition form has not be filled up.
- 3. The requisition has not been received along with the copy of challan in Form 'B'.
- 4. The secret seal of the concerned Department / Ministry has not been put on the form.
- 5. Name / Designation / Telephone No. & Name of the sponsoring authority has not been mentioned in the form.
- 6. The requisition is not sponsored by the authorised officer.
- 7. The requisition form is not accompanied by the
  - (i) old photo pass
  - (ii) bank challan for Rs. (10/-)/(20/-)/(30/-)/ (40/-)/(50/)
  - (iii) copy of Police Report (FIR)
  - (iv) receipt from MHA Sepoy
  - (v) photos of 3x3 cms. (one/two) with 75% area covered with image of the face.
  - (vi) copy of order (appointment/transfer/change of designation).
- 8. The official is not entitled to restricted / open pass.
- Recommendation of JS (Admn) of the concerned Ministry/Department may please be obtained.