

Account Number  
 (for branch use only)

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**The Catholic Syrian Bank Ltd**  
 (Regd. Office: Thrissur)

Branch .....

 Application for **CSB...Students Support Savings Scheme** Account

Please affix a passport size photograph here.

**My particulars**

Name (in block letters)	Mr./ Ms. ....															
	Nationality: Indian/..... Date of Birth <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>									D	D	M	M	Y	Y	Y
D	D	M	M	Y	Y	Y	Y									
Permanent Address	..... ..... .....															
	..... PIN <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>															
Present Address	Ph: ..... (M) .....															
	Class/Dvn. .... Institution .....															
Proof of Identity	Place/Street .....															
	City.....State..... PIN <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>															
Name of guardian*	Mr./Ms. .... Relationship.....															
Address of guardian* (if different from the above)	..... .....															
	E. mail.....PIN <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>															
	Ph: (O) ..... (R)..... (M).....															

**Request, Agreement, Undertaking and Specimen Signature**

Please open an account in my name, under your CSB...Students Support Savings Scheme and issue me an ATM Card/ other debit card(s). I have read and agree to comply with the rules of the Bank in force from time to time governing conduct of the account and use of ATM card/ debit card. I also agree to comply with/ be bound by RBI/GOI instructions regarding the conduct of account and use of ATM Card/ debit card from time to time. I hereby undertake that the account will not be used for money laundering or any other unlawful purpose, whatsoever.

Date .....

Signature of applicant

**Introduction**

Certificate by Head of Institution	Certified that Mr./Ms. ...., is a student of this institution as stated hereinabove.
	Office Stamp
	Signature, name and Designation
	Date.....
Introduction by others	I hereby certify that the applicant stated hereinabove is known to me for ..... months/ years and confirm that his/her address(es) given above is true and correct.
	Name: Mr/Ms . .... A/c. No. .... Address..... ..... Place .....
	Date .....
	Signature of Introducer.

\* Optional

**Nomination**

Nomination under Sec. 45 Z of the Banking Regulation Act 1949 and Rule 2 (1) of the Banking Companies (Nomination) Rule 1985 in respect of bank deposits.

I/We..... (Name(s))

Nominate the following persons to whom, in the event of my/our/minor's death, the amount of deposit, particulars which are given below, may be returned by The Catholic Syrian Bank Ltd. ....branch.

**Deposit Details**

Name & Address of Nominee	
Relationship with Depositor, if any	
Age	
If Nominee is a minor* his/her date of birth	
Nature	
A/c No.	

As the nominee is a minor on this date, I/We appoint.....  
 .....(Name & Address & Age) to receive the amount of the deposit in the account on behalf of the nominee in the event of my/our/minor's death during the minority of the nominee.

+Signature(s) of Depositor(s) 1. .... 2. .... 3. ....

Name, Address & Signature of Witness .....

Date..... Place..... Signature .....

\*where deposit is made in the name of minor, the nomination should be signed by a person lawfully entitled to act on behalf of the minor. Strike out if nominee is not a minor.

**Form No. 60**

Form of declaration to be filled by a person who does not have either PAN or GIR number and who makes payment in cash in respect of transactions in clauses (a) to (h) of Rule 114 B.

1. Full name and address of the declarant :
2. Particulars of transaction :
3. Amount of transaction :
4. Are you assessed to Tax? : Yes/No
5. If yes:
  - (i) Details of Ward/Circle/Range where the last return of income was filed?
  - (ii) Reason for not having PAN/GIR?
6. Details of the document being produced in support of address in Col.1

**Verification**

I ..... do hereby declare that what is stated above is true to the best of my knowledge and belief.

Verified today ..... day of.....

Date : .....

Place: .....

Signature of the declarant

**Instructions**

Documents which can be produced in support of the address are:

Ration Card, Passport, Driving Licence, Identity Card issued by any institution, copy of the Electricity Bill, Telephone Bill showing Residential Address, any document of communication by any authority of Central/State Govt./Local Bodies showing residential address, any other documentary evidence in support of the address given in the declaration.

**For Bank use only**

Identity of applicant verified and account opened.

Date..... Signature..... Name and Designation .....