



Atma Vani

A Religious Charitable Organization

Regd. Office – N. L. – 10/45, Barra – 6, Kanpur (U.P.) – 208027 (India)

Ph.: +91-512-2285840, +91-9335317527 Email – Info@atmavani.org, www.atmavani.org

Volunteer Form

PHOTO

S. No.

Name (Rev. /Dr. /Mrs. /Mr. /Miss) :

Father's Name :

Mother's Name :

Sex : Male/ Female

Date of Birth : PAN No

Educational Qualification :

Spouse Name (If Married) :

Permanent Address :

Correspondence Address :

Contact No. : Email ID

Proof of Identity : Voter ID card/ Passport/ Driving License/ Aadhar Card

Reference :

Declaration: I S/o or D/o or W/o do hereby declare that
the details given above are true to the best of my knowledge.

Date:

Place:

(Signature)

For Office Use Only

Application received on date

Name..... ID No.....

Date of Issue..... Validity.....

Approved By.....

(Auth. Sign)