

## **CONSENT FORM**

I, \_\_\_\_\_ S/o,D/o,W/o Sh. \_\_\_\_\_  
resident of \_\_\_\_\_ holder of Aadhaar  
No. \_\_\_\_\_ and Mobile No. \_\_\_\_\_ hereby give my consent to  
the implementing Department, (Director Higher Education, Chandigarh Administration)  
for using my Aadhaar Number, mobile Number and bank details to establish and  
authenticate my identity under the scheme \_\_\_\_\_.  
Further, I hereby give the consent that my Aadhaar number may be seeded with my  
bank account and can be used for authentication and disbursement of benefit in my  
account.

**(Signature/Thumb impression of Applicant)**

Date:

Name:

Address: