ಸೈನಿಕ ಕಲ್ಯಾಣ ಮತ್ತು ಪುನರ್ವಸತಿ ಇಲಾಖೆ Department of Sainik Welfare ಕನ್ನಡಕ ಅನುದಾನಕ್ಕಾಗಿ ಅರ್ಜಿ Application for spectacle grant

Step 1: Go to sevasindhu.karnataka.gov.in website and click on Departments & Services



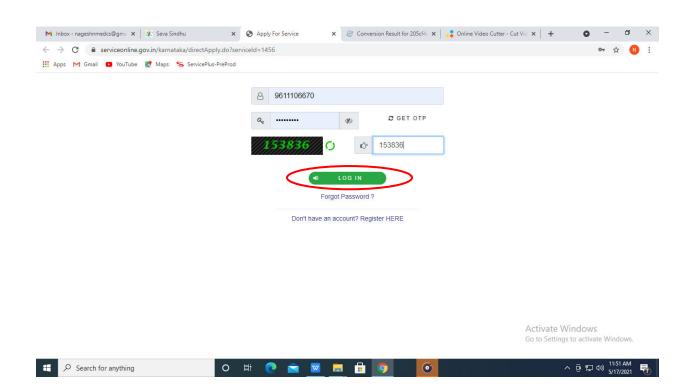
Step 2: Click on <u>Sainik Welfare</u> and select <u>Application for spectacle grant</u>. Alternatively, you can search Application for spectacle grant in the <u>search option</u>.

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| SRI. B.S.YEDIYURAPPA | Annual Contractor | SRI. S.SURESH KUMAR |
| Hon'ble Chief Minister, | A CALL AND A CALL | Hon'ble Minister of Primary & Secondary |
| Government of Karnataka | TRANSPORTER TRANSPORT | Education and Sakala, Government of Karnataka |
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| | | Search Service |
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| + North Western Karnataka Road Transport Corporation | + PRE-UNIVERSITY BOARD | + Revenue Department |
| | | |
| + Para Medical Board | + Primary Education Department | Revenue Department (Bhoomi, UPOR and Diasaster Management) |
| | | |
| + Personnel and Administrative Reforms | + Public Works Department | + Rural Development And Panchayath Raj Department |
| | | |
| + Planning, Programme Monitoring & Statistics Department | + Rani Channamma University | |
| se Xallel 23 en 16 | | Sainik Welfare & Resettlement |
| + Ports and Inland Water Transport Department | + Registrar of Cooperative Societies | |
| | | Application for House Repair Grant |
| | | Form for Marriage Grant of Daughter of ESM |
| | | Application for spectacle grant |
| | | Application for speciacle grant |

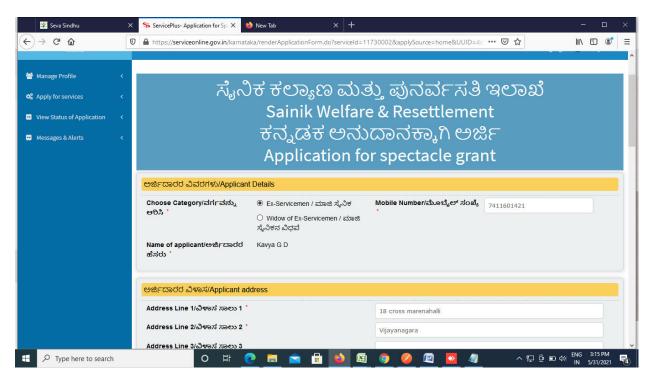
Step 3 : Click on Apply online

| M Search results - b 🗙 📔 Re | evenue Pushed 🛛 🗙 📔 🚹 New a | nd OTC Rei 🗙 | 😤 Seva Si | ndhu 🗙 | (4) WhatsAp | p x | 🚮 Zimbra: Inb | oox (45 🗙 🛸 5 | ServicePlus-Prod X | + | 0 | - 0 | × | |
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| Government of Kernels | Supporting Document: 1. Copy of Identity Card 2. Spectacle purchased bill | | | | | | | | | | | | | |
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| | Application Fee : NA | | | | | | | | | 0 3 | | | | |
| | Service Charge (Free for | Online Submi | i ssion) : 30 | | | | | | | | | | | l |
| + North Western Kama | Delivery Time (Days) : 7 | | | | | | | | | | | | | |
| + Para Medical Board | Procedure for applying: 1. Applicant shall fill the for 2. The department shall pro 3. Once the service is delived | ocess the valid | application | | oply for this servi | ce | | | | | | | | |
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| https://serviceonline.gov.in/karnataka/c | directApply.do?serviceId=1173 | | | | | | | | | | | | | |
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Step 4: Enter the username, password/OTP, captcha and click on Log In button



Step 5: Fill the Applicant Details



Step 6: Verify the details. If details are correct, select the checkbox I agree & Submit

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| | Branch/ಶಾಖೆ * | Tumkur | | | |
| | IFSC Code/ಐ.ಎಫ್.ಎಸ್.ಸಿ ಕೋಡ್ " | CNRB0000522 | | | |
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Step 7: A fully filled form will be generated for user verification. If have any corrections, Click on **Edit** option otherwise Proceed to attach annexures.

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| | Mobile Number/ಮೊಬೈಲ್ ಸಂಖ್ಯೆ : | 7411601421 | | |
| | Name of applicant/ಅರ್ಜಿದಾರರ ಹೆಸರು : | Kavya G D | | |
| | Field : | 18-07-1994 | | |
| | ಅರ್ಜಿದಾರರ ವಿಳಾಸ/Applicant addres | \$5 | | |
| | Address Line 1/ವಿಳಾಸ ಸಾಲು 1 : | 18 cross marenahalli | | |
| | Address Line 2/ವಿಳಾಸ ಸಾಲು 2 : | Vijayanagara | | |
| | Country/ದೇಶ : | India | | |
| | State/താഷ്ട്ര : | KARNATAKA | | |
| | District/ಜಿಲ್ಲೆ : | TUMAKURU | | |
| | Postal / Zip Code/ಅಂಚೆ / ಪಿನ್ ಕೋಡ್ : | 560078 | | |
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Step 8 : Click on Attach annexures

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| | Confirm Bank Account No./ಬ್ಯಾಂಕ್ ಖಾತೆ ಸಂಖ್ಯೆ ಖಚಿತಪಡಿಸಿ : | 0522101516173 | | ^ |
| | Bank Name/ಬ್ಯಾಂಕಿನ ಹೆಸರು : | canara | | |
| | Branch/ಶಾಖ් : | Tumkur | | |
| | IFSC Code/ಐ.ಎಫ್.ಎಸ್.ಸಿ ಕೋಡ್ : | CNRB0000522 | | |
| | hidden District : | BENGALURU RURAL | | |
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| | l hereby declare that the particulars given above a ಪ್ರಮಾಣೀಕರಿಸುತ್ತಿದ್ದೇನೆ. | re true to the best of my Knowledge and belief./ಮೇಲೆ ನೀಡಲಾದ ವಿವರಗಳ | ಸಿ ನನ್ನ ಜ್ ಯಾ ನದ ಮಟ್ಟಿಗೆ ಸಂಪೂರ್ಣ ಸತ್ಯವ | ಾಗಿರುತ್ತದೆಂದು ನಾನು |
| | I Agree : | Yes | | |
| | Additional Details Apply to the Office | Sainik Welfare District Office(DISTRICT - BENGALURU RURAL) | | |
| | Draft Reference No : | Draft_SK004S/2021/00005 | | |
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Step 9: Attach the annexures and click on save annexures

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Step 10 : Saved annexures will be displayed and click on eSign & Submit to proceed.

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| | I Agree : | Yes | | |
| | Annexure List | | | |
| | 1) Identity Card | Identity Card | | |
| | 2) Spectacle purchased bill | Spectacle purchased bill | | |
| | 3) Govt/ECHS Doctor Recommen | dation Gov//ECHS Doctor Recommendation | | |
| | Additional Details | Sainik Welfare District Office(DISTRICT - BENG | | |
| | Apply to the Olifce | Samik Wellare District Onice(DISTRICT - BENG | ALUKU KUMAL) | |
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Step 11 : Click on I agree with above user consent and eSign terms and conditions and Select authentication type to continue and click on **OTP**.

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| | hidden District : BENGALURU RURAL | -12 | | | | | ^ |
| | Consent Authentication Form | × | | | | | |
| | I hereby state that I have no objection in authenticating myself with Aadhaar based authentication system and consent to prov my Aadhaar number along with the authentication details for the purposes of availing "Application for Spectacle grant" by eSigning Application form and Enclosure(s). I understand that the OTP I provide for authentication shall be used only for authenticating my identity through the Aadhaar Authentication system, for obtaining my e-KYC through Aadhaar e-KYC service for the issuance of Digital Signature Certificate (DSC) for this specific transaction and for no other purposes. For the creation of I understand that the options that I have chosen are the ones that shall be populated in the DSC generated by the CA and i prov my consent for the same. I also understand that the following fields in the DSC generated by the CA are mandatory and I give m consent for using the Aadhaar provided e-KYC information to populate the corresponding fields in the DSC. | y and DSC, vide | ುಟ್ಟಿಗೆ ಸಂ | ಪೂರ್ಣ ಸತ್ಯವಾಗಿರುತ್ತ: | ತೆಂದು ನಾ | | |
| | 1. Common Name (name as obtained from e-KYC) 2. Unique Identifier (hash of Aadhaar number) 3. Pseudonym (unique code sent by UIDAI in e-KYC response) 4. State or Province (state as obtained from e-KYC) 5. Postal Code (postal code as obtained from e-KYC) 6. Telephone Number (hash of phone as obtained from e-KYC) 1 understand that ServicePlus shall ensure security and confidentiality of my personal identity data provided for the purpose of Aadhaar based authentication. | f | | | | | |
| | I agree with above user consent and eSign terms and conditions Select authentication type to entinue OTP | | Cancel | | | | |
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Step 12 : Enter Aadhar Number and click on get OTP

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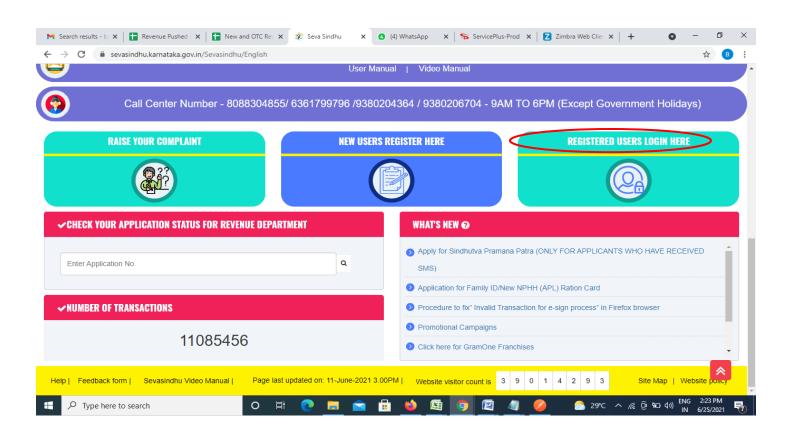
Step 13 :Enter OTP and click on Submit

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Step 14 :After submission, acknowledgement will be generated. Acknowledgment consists of applicant details, application details and the payment details for applicant's reference.

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| | | Office Name / ಕಛೇರಿ ಹೆಸರು | Sainik Welfare & Resettlement/ಸೈನಿಕ್ ಕಲ್ಮಾಣ ಕ | ಮತ್ತು ಪುನರ್ವಸತಿ ಇಲಾಖೆ | | | | | | | | | |
| | | Sakala No/ಸಕಾಲ ಸಂಖ್ಯೆ | SK004S210000003 | | | | | | | | | | |
| | | Application Date /ಅರ್ಜಿಯ ದಿನಾಂಕ | 31/05/2021 | | | | | | | | | | |
| | | Service Requested /ವಿನಂತಿಸಿದ ಸೇವೆ | Application for Spectacle grant | | | | | | | | | | |
| | | Applicant Name /ಅರ್ಜಿದಾರರ ಹೆಸರು | Kavya G D | | | | | | | | | | |
| | | Applicant Address /ಅರ್ಜಿದಾರರ ವಿಳಾಸ | 18 cross marenahalli Vijayanagara KARNATAKA TUMAKURU 560078 | | | | | | | | | | |
| | | Mobile No /ಮೊಬೈಲ್ ಸಂಖ್ಯೆ | 7411601421 | | | | | | | | | | |
| | | | Type of document(s) Document | nt(s) Attached | | | | | | | | | |
| | | Documents Submitted /ದಾಖಲಾತಿಗಳನ್ನು ಸಲ್ಲಿಸಿದಮಾಹಿತಿ | Identity Card Identity C | ard | | | | | | | | | |
| | | | Spectacle purchased bill Spectacle | purchased bill | | | | | | | | | |
| | | | Govt/ECHS Doctor Recommendation Govt/ECH | S Doctor Recommendation | | | | | | | | | |

Step 15 : To download the certificate, go to the **sevasindhu.karnataka.gov.in** and click on **<u>Registered Users</u>** <u>Login Here</u>



Step 16 : Once the login page is open, enter your username, password/OTP, captcha and click on Submit.

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Step 17 :Click on **View Status of Application --> Track application status**. Enter Application Reference Number (you can refer to Acknowledgment/SMS to get Application Reference Number) and click on **Get Data**.

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Step 18 : Check Current Status of the application. If it is delivered, Click on Delivered.

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Step 19 :Under Issue Document(s), click on Output certificate

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| View Incomplete Application | S.No. | Task Name | Form Details | Issued Document(s) | Status | Remarks | 18 | | | | | |
| Revalidate Payment Modify Submissions | 1 | Application Submission | View | Acknowledgement | Completed | NA | | | E | Get Data | | |
| Messages & Alerts < | 2 | Push application data to DB | NA | Nil | Forwarded | View | 18 | | | | | |
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Step 20 : Application for spectacle grant Certificate will be downloaded. You can print the certificate if required.

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