

All corrections are to be made as per information submitted in the original Application Form by applicant.

**MEMBER DETAILS FOR WHOM CORRECTION REQUIRED**

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**Member ID**   
(Same ID as appeared in the original NRC Application)

Name of Head of Family (HOF)

Field where correction required	Check Box	DESCRIPTION OF FIELD					
		Manner in which data published in Draft			Required Correction		
<b>Names</b>	<input type="checkbox"/>	Name of Member		Assamese/Bengali/ Bodo/English	Name of Member		Assamese/Bengali/ Bodo/English
	<input type="checkbox"/>	Name of Father		Assamese/Bengali/ Bodo/English	Name of Father		Assamese/Bengali/ Bodo/English
	<input type="checkbox"/>	Name of Mother		Assamese/Bengali/ Bodo/English	Name of Mother		Assamese/Bengali/ Bodo/English
	<input type="checkbox"/>	Name of Spouse		Assamese/Bengali/ Bodo/English	Name of Spouse		Assamese/Bengali/ Bodo/English
<b>Age / DOB</b>	<input type="checkbox"/>	Age	<input type="checkbox"/>	Date of Birth	Age	<input type="checkbox"/>	Date of Birth
<b>Sex</b>	<input type="checkbox"/>	Male / Female / Other			Male / Female / Other		
<b>Marital Status</b>	<input type="checkbox"/>	Never married / Currently married / Widowed / Separated / Divorced			Never married / Currently married / Widowed / Separated / Divorced		
<b>Present Address</b>	<input type="checkbox"/>	House / Building Name / No.				House / Building Name / No.	
	<input type="checkbox"/>	Locality / Street Name / Post Office				Locality / Street Name / Post Office	
	<input type="checkbox"/>	Village / Town	<input type="checkbox"/>	Circle	Village / Town	<input type="checkbox"/>	Circle
	<input type="checkbox"/>	District	<input type="checkbox"/>	State	District	<input type="checkbox"/>	State
	<input type="checkbox"/>	Country	<input type="checkbox"/>	Pin Code	Country	<input type="checkbox"/>	Pin Code
<b>Permanent Address</b>	<input type="checkbox"/>	House / Building Name / No.				House / Building Name / No.	
	<input type="checkbox"/>	Locality / Street Name / Post Office				Locality / Street Name / Post Office	
	<input type="checkbox"/>	Village / Town	<input type="checkbox"/>	Circle	Village / Town	<input type="checkbox"/>	Circle
	<input type="checkbox"/>	District	<input type="checkbox"/>	State	District	<input type="checkbox"/>	State
	<input type="checkbox"/>	Country	<input type="checkbox"/>	Pin Code	Country	<input type="checkbox"/>	Pin Code

Field where correction required	Check Box	DESCRIPTION OF FIELD	
		Manner in which data published in Draft	Required Correction
Place of Birth	<input type="checkbox"/>	District	District
	<input type="checkbox"/>	State	State
	<input type="checkbox"/>	Country	Country
Photo	<input type="checkbox"/>	No Photo	Photo to be added as given in NRC Application Form
	<input type="checkbox"/>	Photo shown against wrong member	Photo as shown of Member ID _____ to be shown against my name (the Member ID to be filled up in the blank section)
	<input type="checkbox"/>	Photo not of my family member	Photo to be added as given in NRC Application Form of my Family
	<input type="checkbox"/>	Photo not submitted	Photo submitted now to be added (Current Colour Photograph with white background to be pasted, not to be stapled) <div style="border: 1px solid black; width: 100px; height: 80px; display: flex; align-items: center; justify-content: center; margin: 5px auto;">                         Photo 2.5cm X 2.5cm                     </div>
Others	<input type="checkbox"/>	Please specify	

**INSTRUCTIONS FOR FILLING UP CORRECTION FORM**

- Put a Tick  mark in the box against the field in which correction is required.
- Fill up only the appropriate box wherever any change is required. Other fields requiring no correction are to be left blank.
- Head of the Family (HOF)/any other Adult Member will submit Correction Form(s) for all member of his/her ARN together at designated NSK/Online .
- One Form is only meant for one member and as many forms will have to be submitted as the number of members for which corrections are required. Further, all forms of all members of one ARN will have to be submitted together.
- Correction intended for any field should be mentioned under the "Required Correction" column against the relevant field.
- Correction in name of Member/Father/Mother/Spouse can be made in both English and Assamese/Bengali/Bodo (as appeared in Draft published) separated by coma (,).
- Particulars in English (only of Member Name, Father's Name, Mother's Name and Spouse's Name) can be viewed by accessing the online Draft display Portal.
- For Date of Birth, Pin Code etc. use only Arabic numbers as indicated here.  

0 1 2 3 4 5 6 7 8 9
- All corrections are to be made as per information submitted in the original Application Form by applicant. Changes that might have occurred in status of applicants since 2015 such as in marital status, age, present address etc. will not be changed by way of Correction Form submission. This is to be noted that correction will be made only if there is any data entry error in digitizing the Application Form submitted in May - August 2015. In case of change in present address also, the same can only be indicated in the Correspondence Address section below, and not in the present address section of Side-A.
- The Correction Form is to be filled using BLACK BALL POINT PEN only.**

I declare that all the information provided in the application is true to the best of my knowledge and belief.

Total No. of members for whom Correction Form submitted  Member ID of the person submitting the Form   
(same ID as appeared in the original NRC Form)

Signature/ Thumb impression  
 (for male left thumb and for female right thumb) of Head of the Family (HOF)/any other Adult Member of the Family

Correspondence Address									
Name of the Applicant/HOF									
House/Building Name/No					Locality/Street Name/Post Office				
Village/Town		Circle		District		State/Country			
Contact No.									
P I N C O D E									