



Dedicated to Honoring Senior Citizens of
Nepal

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Document Metadata

Application ID: 10
Submission Date: Dec 01, 2025
Printed On: Dec 01, 2025 20:54

MEMBERSHIP APPLICATION FORM

Personal Information

FULL NAME

test

CITIZENSHIP NUMBER

87-23-43-2-33-2

EMAIL ADDRESS

d@you.com

DATE OF BIRTH

Dec 01, 2025

PHONE NUMBER

98765456776

APPLICATION DATE

Dec 01, 2025 20:53

APPLICANT PHOTO



Address Information

STREET ADDRESS

hhh

PROVINCE

गण्डकी प्रदेश

DISTRICT

बागलुङ

LOCAL LEVEL

बागलुङ नगरपालिका

WARD NUMBER

वार्ड 2

Application Status

STATUS

PENDING

CITIZENSHIP (FRONT)



CITIZENSHIP (BACK)



Applicant Signature

Official Stamp/Signature

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Application ID: 10 | Generated on: 2025-12-01 20:54:50