



TOURISM EMPLOYEES WELFARE FUND

6th Floor Victoria House Cnr Barracks & St Louis Street, Port Louis

Email: tewfund@intnet.mu, Web Site: www.tewf.mu,

Tel No: 211 4343; Fax No: 213 5462

Application Form for Parental Gift

TO BE FILLED BY THE APPLICANT

Name of Applicant:.....

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Address of Applicant:

Tel No: Mobile No:

Occupation: Years of Service

Bank Name: Bank Address:

Bank A/c No:.....

Child Details

Place of Birth : Date of Birth :

Name of Employer:

Address of Employer:

Tel No : (Office)

I, certify that all the above information are correct.

.....

Date

.....

Signature of applicant

The applicant should call in PERSON with both ORIGINALS & COPIES of the following documents:

- 1) ID of Applicant
- 2) Bank A/C number (Payroll / Bank Statement)
- 3) Birth Certificate of new born child
- 4) Certificate from your organisation (Valid for one month ONLY)

Please Note:

The certificate should specify the date of employment, period of contribution, and whether the applicant is on leave without pay.

Members contributing to the TEWF are hereby informed that parental gift is payable to either the parent on the presentation of a birth certificate within 6 months from the date of delivery.