

KUWAIT MAR THOMA PARISH REPATRIATION FUND  
APPLICATION: ONE-WAY/TWO-WAY

I. Applicants Details

Name : .....  
Membership No. : ..... Contact Tel. No. ....  
Prayer Group : .....  
Contact Address : .....  
Mother Parish : ..... Place: .....  
Permanent Address : .....

II. Employment Details

Were you employed in Kuwait : Yes/No  
If 'Yes' please fill the following:  
Name of the company you worked last: .....  
From: / / To: / /  
If 'No' please fill the following:  
When did you come to Kuwait: / /  
Do you have any close relatives/friends in our Parish: Yes/No  
If 'Yes' name the person : .....

III. Family Status

Is your family in Kuwait : Yes/No

IV. Repatriation or Return Trip Assistance

One way or Two way: .....  
Destination in India : .....  
Reason for Repatriation or Return Trip: .....

Place: .....

Date : .....

Signature: .....

---

For Office use only

Name & Signature of the Kaisthana Samithi member

Or Prayer Group Secretary/Vice-president : .....

Comments by the above signatory (If any) : .....

Ticket sanctioned : .....

Airline specification : .....

Amount to be paid to Airlines : KD. ....

Remarks: .....

Date: / /

.....  
Approved by the Vicar