TAJNEED FORM [2024-25]

STATE:		
DISTRICT:		
MAJLIS:		
	NAME:	
QAID MAJLIS	MOBILE:	
NAZIM TAJNEED	EMAIL:	
	NAME:	
	MOBILE:	
	EMAIL:	
ADDRESS:		
NOTE: IT'S MANDATORY TO PR	ROVIDE ALL THE DET	AILS MENTIONED IN THIS FORM. PLEASE SEND THE COMPLETED FORM TO MARKAZ AS SOON AS POSSIBLE.
		GO TO NEXT SHEET [TAJNEED DETAILS]

S.No	Name of Khadim	Father's Name	IND No.	DOB	уов	Education	Profession	Skill	Namaz [W/WO]	Quran [W/WO]	Moosi [Y/N]	Blood Grp	Mobile Number	Tehrik- E-Jadid [Y/N]	Married [Y/N]

INTERMEDIATE PAGE NO: _____

TOTAL KHUDDAM			
TOTAL MARRIED			
TOTAL UNMARRIED KHUDDAM > AGE 23			
COUNT OF KHUDDAM TO ANSAR THIS YEAR			
COUNT OF KHUDDAM FROM ATFAL THIS YEAR			
TOTAL MOOSI			
I hereby certify that the name and details of all khuddam of our Majlis included in this form are correct to th best of my knowledge.			
SIGNATURE NAZIM TAJNEED WITH DATE			
SIGNATURE QAID MAJLIS WITH DATE AND STAMP			

LAST PAGE