



भारत सरकार / GOVERNMENT OF INDIA पत्तन, पोत परिवहन और जलमार्ग मंत्रालय MINISTRY OF PORTS, SHIPPING AND WATERWAYS नीवहन महानिदेशालय, मुंबई DIRECTORATE GENERAL OF SHIPPING, MUMBAI

DGS Circular 39 of 2025

File No.: 46/4/2025-SWFS (Comp. No.: 34148)

Date: 18.09.2025

<u>Subject: Welfare Schemes Administered by Seafarers' Welfare Fund Society (SWFS) for Indian Seafarers - reg.</u>

The Directorate General of Shipping (DGS), an attached office under the Ministry of Ports, Shipping and Waterways (MoPSW), Government of India, serves as the apex maritime authority responsible for the development, regulation, and promotion of the Indian shipping industry. Since its establishment in 1949, the DGS has played a pivotal role in formulating and implementing shipping policies, maritime safety regulations, and standards for maritime education and training.

- 2. The Seafarers' Welfare Fund Society (SWFS), a central organization registered under the Societies Registration Act, 1860, and the Bombay Public Trust Act, 1950, operates under the administrative purview of the Directorate General of Shipping. As provided under Section 101 of the Merchant Shipping Act, 1958, the SWFS manages the Seafarers' Welfare Fund, which is dedicated to providing a wide array of welfare services and support mechanisms for Indian seafarers and their families, both in India and abroad.
- 3. The SWFS is governed by a Committee of Management (CoM) comprising representatives from Indian and foreign shipowners, seafarers' unions, and government nominees, and is chaired by the Director General of Shipping. The Society is responsible for funding welfare infrastructure, providing grants, acquiring assets, and implementing various physical and digital welfare enhancement projects.
- 4. In accordance with the objectives outlined in Article 3 (XV) of the Society's Memorandum of Association, financial assistance may be granted to Indian seafarers who meet the eligibility criteria specified in Rule 3 of the Society's regulations. Assistance to seafarers and their families are provided under the following schemes:
 - Survivor Benefit Scheme (SBS) Financial assistance to the family of a deceased Indian seafarer



- Invalidity Benefit Scheme (IBS) Support for Indian seafarers declared permanently unfit for sea service
- Family Benefit Welfare Scheme (FBWS) Effective from January 1, 2019, this scheme provides support to dependent families of seafarers
- Maternity Benefit Scheme (MBS) Financial assistance for Indian women seafarers during maternity
- Old Age Benefit Welfare Scheme (OABS) Assistance for seafarers who attain the age of 65 years on or after January 1, 2019
- Death on Board Benefit Scheme (DBBS) Support in cases of death or presumed death occurring on board
- Ex-Gratia Support Benefit Scheme (ESBS) Additional financial aid for specific cases of hardship
- Award to Meritorious Child of Seafarers (AMCS) Educational incentives for children of Indian seafarers
- 5. All Recruitment and Placement Services (RPS) agencies, shipping companies, seafarers' unions, welfare associations, Maritime Training Institutes (MTIs) and other relevant stakeholders are hereby advised to:
- Disseminate the information provided in this circular to both active and retired Indian seafarers
- Assist eligible beneficiaries in accessing application forms and related scheme documentation
- Encourage seafarers' families to keep their contact and banking details updated with the Seafarers Welfare Fund Society (SWFS)
- 6. Details of eligibility criteria, required documentation and application procedures for each scheme may be obtained from following:
 - 1. Attached as enclosure (copy enclosed) to this circular
 - 2. Available on the official website of the DG Shipping (https://www.dgshipping.gov.in)
 - Obtained from the SWFS Office
 Seafarers' Welfare Fund Society (SWFS)
 Nau Bhavan Building, Ground Floor, R. K. Marg, Ballard Estate, Mumbai-400 001
 Tel No. 022 20826980, 22626981, Email: swfs.dgs@govcontractor.in

7. This is issued with the approval of the Director General of Shipping.

Capt Nitin Mukesh

Dy. Nautical Advisor-cum-Senior DDG (Tech)

Enclosure(s): As above

Seafarers' Welfare Fund Society

Existing Welfare Schemes details for Seafarers and to their families

	Scheme Name	Scheme details in brief	Financial Assistance	Application form	Due Date for receipt of application
1	Survivor Benefit Scheme (SBS)	Seafarer who died within 24 months from the date of sign-off from last vessel. *For full details- <u>SBS_Details</u> *	As per attached form for the Scheme.	SBS_Form	Applications to be submitted by the nominee declared by the deceased seafarer for last voyage, within 3 years from the date of death
2	Invalidity Benefit Scheme for Indian (IBS)	Seafarers who became permanently unfit / loss of limb, due to accidental injury, which occurred within 24 months from the date of sign-off from last vessel. *For full details-IBS_Details*	As per attached form for the Scheme.	IBS_Form	Application to be submitted by the seafarer within 3 years from date of Permanent Disability Certificate, issued by D.G. approved medical practitioner.
3	Family Benefit Welfare Scheme (FBWS)	Seafarers can claim for their children (upto max 2 children) on successful completion of: a) Pre-sea training course OR b) Two years full time Post-Graduation Degree/Diploma courses (other than Maritime stream) from any recognized university. *For full details-FBS Rules*	As per attached form for the Scheme.	i) for <u>Pre-sea</u> <u>Training Course</u> <u>form</u> ii) for <u>PG_Degree</u> / Diploma	Application to be submitted within 1 year after completion of course.
4	Maternity Benefit Scheme (MBS)	For female seafarers: for childbirth on or after 21/08/2014. *For full details-MBS_Rules*	As per attached form for the Scheme.	MBS_Form	Application to be submitted within 2 years from date of delivery.
5	Old Age Benefit Scheme (OABS)	Seafarers who complete 65 years & performed minimum 6 months sea service between age of 55 to 60 years and have been engaged through Indian shipping company / RPSL Company . *For full details-OABS Rules*	As per attached form for the Scheme.	OABS_form	Application to be submitted within 1 year form the date of completion of 65 years.



6	Death on Board Benefit Scheme (DBBS)		As per attached form for the Scheme.	DBBS_form	Application to be submitted within a specified period (to be decided say 3 months.)
7	Ex-Gratia Support Benefit Scheme (ESBS) for stranded / abandoned seafarers family	Seafarers who are stranded/abandoned by their owners/employers/RPSL, the next of kin/nominee will receive financial support for the period, seafarer is stranded or for a maximum period of 12 months, whichever is earlier. The benefit to start 2 months after it is established that the seafarer has been abandoned. Effective from 12.03.2025. *For full details- ESBS rules*	As per attached form for the Scheme.	ESBS_form	Application to be submitted within 1 month immediately after the declaration of abandonment by the D.G. Shipping.
8	Award to the Meritorious Child of the Seafarers (AMCS)	Monetary awards to the children of seafarers who tops (who gets first rank in full University) in full time final	As per attached form for the Scheme.	AMCS_form	Application to be submitted within 2 months from the declaration / confirmation from university, about topping in final year degree examination/final year postgraduation degree exam from Indian University.

a.



SURVIVOR BENEFIT SCHEME

DETAILS OF THE 'SURVIVOR BENEFIT SCHEME' FOR THE NOMINEES OF THE DECEASED INDIAN SEAFARER, WHO DIED DURING OFF ARTICLE PERIOD.

- 1. Pursuant to the objects of the Seafarers' Welfare Fund Society (herein after referred to as the Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the nominee(s) of the Indian seafarer, as being eligible in terms of provisions of rule 3 herein below, may be granted the financial assistance under the 'Survivor Benefit Scheme', on death of the *Indian* seafarer under the circumstances and to the extent detailed herein below.
- 2. Such financial assistance on death of an *Indian* seafarer shall be granted at the absolute discretion of the society and such financial assistance may be dispensed with and / or curtailed /enhanced, suspended or completely withdrawn at any time without any prior notice. The availability of such *financial assistance under the 'Survivor Benefit Scheme'* to eligible *beneficiary(ies)* of deceased Indian seafarer, during off articled period does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question.

3. Eligibility.

The scheme is applicable to the *Indian* seafarers, *holding CDC book*, who are *last* recruited / engaged by the Indian ship-owners or through registered RPS, for either Indian or foreign flag vessels, before their death.

The financial assistance under the 'Survivor Benefit Scheme' on death of an *Indian* seafarer shall be paid to the eligible beneficiary (ies), of the *Indian* seafarer who has expired on or after 21.08.2014, within off article period of 12 months (amended to 24 months w.e.f. 31/05/2022) from the date of sign off from the last vessel/ship as recruited/engaged above. The eligible beneficiary (ies), will be as per the nomination(s) declared by the Indian seafarer with the last recruited Indian ship-owner or registered RPS company, as the case maybe during his/her employment, prior to his/her death., failing which as per legal heir certificate issued by the competent authority.

4. Quantum.

The quantum of financial assistance under this scheme shall be ₹.1, 00,000/- (₹One lakh only) to the eligible beneficiary (ies) of the *Indian* seafarer. (Refer note given below)

- 5. The Society may approach the Indian ship-owners /registered RPS, company concerned and obtain such particulars as may be necessary for the purpose of payment of financial assistance envisaged under this scheme.
- 6. To receive the benefit under this scheme only such applications will be entertained *which* are submitted to Seafarers' Welfare Fund Society within a period of two years upto 30/05/2022 and three years for death of seafarer which occurred on or after 31/05/2022 from the date of death of the *Indian* seafarer.
- 7. Application for financial assistance under this scheme is to be made in the prescribed form, along with attested copy of death certificate and original CDC book.



8. Notwithstanding anything contained herein above in all doubtful/disputed and/or exceptional cases, the Committee of Management of the SWFS may examine and decide the cases, on case to case basis, and its decision shall be final.

Note 1: The amount of financial assistance has been enhanced to ₹. 2,00,000/- (Rupees Two lacs only) w.e.f. 16/03/2016 for those death cases of seafarer who has expired on or after 16.03.2016 within off article period of 12 months from the date of sign off from the last vessel/ship as recruited/engaged by Indian Shipping company or through RPSL company.

Note 2: The amount of financial assistance has been enhanced to ₹. 4,00,000/- (Rupees Four Lackhs only) w.e.f. 29/04/2024 for those death cases of seafarer who has expired on or after 29/04/2024, within off article period of 24 months from the date of sign off from the last vessel/ship as recruited/engaged by Indian Shipping company or through RPSL company.

(Autonomous Body of Ministry of Ports, Shipping and Waterways Government of India) (Registered Charitable Trust-Regn. No.F/1364/BOM)

Nau Bhavan Building, Ground Floor, R. K. Marg, Ballard Estate, Mumbai-400 001 Tel.No. 022 - 20826980, 22626981, Email: swfs1966@gmail.com

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER 'SURVIVOR BENEFIT SCHEME'

(Please refer notes given below before submitting this application form.)

2. CDC Number 3. The name of the vessel last sign-off 4. Indian shipowners Co. name OR Recruitment & Placement Service (RPS) provider name & its Registration No. 5. Applicant's name in full 6. Relationship with seafarer 7. Correspondence address Of the applicant 8. Telephone No./Mobile No. 1. Tel No	1.	Seafarer's name in full	:	Mr./Mrs./M	s.:		-
3. The name of the vessel last sign-off: Sign-off		(As per CDC Book)					
sign-off 4. Indian shipowners Co, name OR Recruitment & Placement Service (RPS) provider name & its Registration No. Service (RPS) provider name Serv	2.	CDC Number	:				
OR Recruitment & Placement Service (RPS) provider name & its Registration No. 5. Applicant's name in full 6. Relationship with seafarer 7. Correspondence address Of the applicant 8. Telephone No./Mobile No. Tel No. (with STD code No.) I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother Mr./Mrs./Ms. (Detet whichever is not applicable.) I, now request you to grant me, the financial assistance under the 'Survivor Benefit Scheme' as per SWF Strules as applicable for the scheme. I am submitting herewith following documents, to receive the claim uscheme. I give below my Bank account details. (Bank details are mandatory, without which the applicant of be processed.) (a) Attested copy of death certificate of the seafarer. (b) Original latest CDC book (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card Card/Indian passport etc.) Details of the bank, where the financial assistance amount to be credited: (Attach a legible copy of front page of Bank pass book of SB account, to verify the details.) Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place: (Applicant's Signature/Thumb Impression)	3.		:		Date of si	gn-off:	_
Service (RPS) provider name & its Registration No. :	4.		: .				
& its Registration No. : 5. Applicant's name in full : 6. Relationship with seafarer : 7. Correspondence address : 9. Of the applicant : 8. Telephone No/Mobile No. Tel. No. Mobile No. (with STD code No.) I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother expired on (with STD code No.) I, now request you to grant me, the financial assistance under the 'Survivor Benefit Scheme' as per SWF Strules as applicable for the scheme. I am submitting herewith following documents, to receive the claim uscheme. I give below my Bank account details. (Bank details are mandatory, without which the applicanot be processed.) (a) Attested copy of death certificate of the seafarer. (b) Original latest CDC book (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card Card/Indian passport etc.) Details of the bank, where the financial assistance amount to be credited: (Attach a legible copy of front page of Bank pass book of SB account, to verify the details.) Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place: (Applicant's Signature/Thumb Impression) Name of Applicant: (Applicant's Signature/Thumb Impression)		OR Recruitment & Placement	:				
5. Applicant's name in full 6. Relationship with seafarer 7. Correspondence address 5. Of the applicant 8. Telephone No./Mobile No. Tel. No. Mobile No. I, the undersigned, wish to inform you that my husband/wife/son/daughter/father/mother Mr./Mrs./Ms. expired on		Service (RPS) provider name	: .				
6. Relationship with seafarer 7. Correspondence address Of the applicant 8. Telephone No./Mobile No. Tel. No. (with STD code No.) I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother Mr./Mrs./Ms. (Delete whichever is not applicable.) I, now request you to grant me, the financial assistance under the 'Survivor Benefit Scheme' as per SWF S rules as applicable for the scheme. I am submitting herewith following documents, to receive the claim uscheme. I give below my Bank account details. (Bank details are mandatory, without which the applicant be processed.) (a) Attested copy of death certificate of the seafarer. (b) Original latest CDC book (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card Card/Indian passport etc.) Details of the bank, where the financial assistance amount to be credited: (Attach a legible copy of front page of Bank pass book of SB account, to verify the details.) Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account, to verify the details.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place: (Applicant's Signature/Thumb Impression)		& its Registration No.	:				
7. Correspondence address Of the applicant 8. Telephone No./Mobile No. Tel. No	5.		: ,				
Of the applicant 8. Telephone No./Mobile No. Telephone No./Mobile No./Mobile No. Telephone No./Mobile No./Mob	6.		: .				
8. Telephone No./Mobile No. Tel. No. Mobile No. (with STD code No.) I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother Mr./Mrs./Ms. expired on	7.		:				-
I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother Mr./Mrs./Ms							
I, the undersigned, wish to inform you that my husband/wife/son/daughter /father/mother Mr./Mrs./Ms	8.	Telephone No./Mobile No.				Mobile No.:	
Mr./Mrs./Ms				(with STD coo	le No.)		
I, now request you to grant me, the financial assistance under the 'Survivor Benefit Scheme' as per SWF Strules as applicable for the scheme. I am submitting herewith following documents, to receive the claim uscheme. I give below my Bank account details. (Bank details are mandatory, without which the application to be processed.) (a) Attested copy of death certificate of the seafarer. (b) Original latest CDC book (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card Card/Indian passport etc.) Details of the bank, where the financial assistance amount to be credited: (Attach a legible copy of front page of Bank pass book of SB account, to verify the details.) Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place:							
I, now request you to grant me, the financial assistance under the 'Survivor Benefit Scheme' as per SWF Strules as applicable for the scheme. I am submitting herewith following documents, to receive the claim uscheme. I give below my Bank account details. (Bank details are mandatory, without which the applicant be processed.) (a) Attested copy of death certificate of the seafarer. (b) Original latest CDC book (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card Card/Indian passport etc.) Details of the bank, where the financial assistance amount to be credited: (Attach a legible copy of front page of Bank pass book of SB account, to verify the details.) Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place: (Applicant's Signature/Thumb Impression) Name of Applicant:					expired on _	*	
Name of the Bank Branch Name Branch Address S.B. A/c.No. Branch IFSC Code (Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place:	not (a) (b) (c)	be processed.) Attested copy of death certification original latest CDC book Attested copy of any Id Card/Indian passport etc.) ails of the bank, where the financial	cate of the s	eafarer. of of the	applicant (i.e. P	'AN card/Voter's ID	
(Note: Attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manbank.) I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place:							1
I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place:	Nan	ne of the Bank Branch Name	Dianen	Address	3.B. A/C.NO.		
I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refinancial assistance in full to the SWF Society. Place:	7						
Date: Name of Applicant:	I de date fina	clare that, I am claiming this fine e, if it is found, that I am not the ncial assistance in full to the SWI	ancial assist actual bene	ance on the	strength of the doc	uments submitted above	ve, and at later
	Piac	:e		-	(Applicant's Signatu	re/ Thumb Impression)	_
Notes	Dat	e: Nam	ne of Applic	ant:			_
1: The scheme is applicable only for Indian seafarers for cases of death on or after 21.08.2014. 2: The scheme is applicable to cases of death of seafarer within 12 months from the date of sign- off from the last ves recorded in the Indian CDC Book. 3: The application for financial assistance should be received by the Society within two years period from the date of the seafarer within 12 months fr	2: reco	The scheme is applicable only for The scheme is applicable to cases rded in the Indian CDC Book.	of death of se	afarer within	12 months from the da	ate of sign- off from the las	

the seafarer.

		ound eligible/not eligible under 'S	
assistance of ₹	(Rupees		Only)

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INVALIDITY BENEFIT SCHEME

DETAILS OF THE 'INVALIDITY BENEFIT SCHEME' FOR THE INDIAN SEAFARER WHO BECOME PERMANANTLY UNFIT FOR SEAFARING PROFESSION DURING OFF ARTICLE PERIOD.

- 1. Pursuant to the objects of the Seafarers' Welfare Fund Society (herein after referred to as the Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the *Indian* seafarer, as being eligible in terms of provisions of rule 3 herein below, may be granted the financial assistance under the 'Invalidity Benefit Scheme', on becoming permanently unfit for seafaring profession under the circumstances and to the extent detailed herein below.
- 2. Such financial assistance to for the Indian seafarer, on becoming permanently unfit for seafaring profession shall be paid, at the absolute discretion of the society and such financial assistance, may be dispensed with and / or curtailed /enhanced, suspended or completely withdrawn at any time without any prior notice. The availability of such *financial assistance under the* 'Invalidity Benefit Scheme' to the eligible *Indian* seafarer, during off article period does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question.

3. Eligibility.

The scheme, is applicable to the *Indian* seafarers, *holding CDC book*, and who are *last* recruited / engaged, by Indian ship-owners or through registered RPS, for either Indian or foreign flag vessels, before occurrence of an injury, due to which he/she became permanently unfit for seafaring profession.

The *financial assistance under the* 'Invalidity Benefit Scheme' shall be granted to the *Indian* seafarer, who has become permanently unfit, for the seafaring profession, due to an injury that occurred on or after 21.08.2014, during off article period of 12 months (amended to 24 month w.e.f. 31/05/2022), from the date of sign off from the last vessel/ship, as recruited/engaged above.

4. Quantum.

The quantum of financial assistance under this scheme shall be ₹.1,00,000/- (₹One lakh only) to the eligible *Indian* seafarer. (Refer Note given below.)

- The Society may approach the Indian ship-owners /registered RPS, company concerned and obtain such particulars as may be necessary for the purpose of payment of financial assistance envisaged under this scheme.
- 6. To receive the benefit under this scheme only such applications will be entertained *which* are submitted to Seafarers' Welfare Fund Society within a period of *two* years upto 30/05/2022 and for accidental injury which occurred on or after 31/05/2022 the time limit is increased to three years from the date of certificate issued by the DGS approved medical practitioner.
- 7. Application for financial assistance under this scheme is to be made in the prescribed form, along with the certificate issued by the DGS approved Medical Practitioner certifying the *Indian* seafarer 'Permanently Unfit' for the seafaring profession due to injury, copy of discharge card/certificate and medical report card issued by the hospital (where the said Indian seafarer was admitted for the treatment) and original CDC Book.
- 8. Notwithstanding anything contained herein above in all doubtful/disputed and/or exceptional cases, the Committee of Management of the SWF Society may examine and decide, on case to case basis, and its decision shall be final.

Note 1: The amount of financial assistance has been enhanced to Rs. 200000/- (Rupees Two lacs only) w.e.f. 16/03/2016 for the seafarer, where the injury to the seafarer has occurred on or after 16.03.2016, within off article period of 12 months from the date of sign off from the last vessel/ship.

Note 1: The amount of financial assistance has been enhanced to Rs. 6,00,000/- (Rupees Six lacs only) w.e.f. 29/04/2024 for the seafarer, where the injury to the seafarer has occurred on or after 29/04/2024, within off article period of 24 months from the date of sign off from the last vessel/ship.

SEAFARERS' WELFARE FUND SOCIETY.

NOU BHAVAN, GROUND FLOOR, R.KAMANI MARG,
BALLARD ESTATE, MUMBAI - 400 001

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER 'INVALIDITY BENEFIT SCHEME'. (Please refer notes given below before submitting this application form.)

Seafarer's name in Full (As per CDC Book)				Mr./Mrs./Ms.		
CDC Bo	ok Number	r				
		Co. name OR Recrui				
		(RPS) provider Nam				
		e of the vessel last s	ign-off			
Correspo	ondence ad	dress				
Telephor Mobile N		th STD Code) /		Tel. No	Mobile No	
		have become <u>PER</u>	MANANTLY UN	FIT, for seafari	ng profession due to an accide	ental injury
as applic	able for the	e scheme. I am subm	itting herewith foll	owing document	enefit Scheme', as per SWF Soc ts, to receive the claim under th thout which the application	e scheme. I
processe		nk account details.	Dank details are	mandatory, wi	thout which the application s	will not be
Sr. No.				Document		
1				eafarer showing l	last sign-off vessel name and da	ite.
2		copy of latest Indian				
3					oner certifying the Indian seafa	rer
"Permanently Unfit" for the seafaring profession due to injury. 4 Attested copy of discharge card/certificate and medical report card issued by the hospital (where the Indian seafarer was admitted for the treatment.)				the		
Details o	of the bank	k, where the financia	al assistance amou	nt to be credited	d (mandatory)	
Name of	the bank	Branch name	Branch address	S.B. A/c no.	Branch IFSC code	
duly atte I declare date if it undertak	that I am c is proved t e to refund	Branch Manager of claiming this financia that I am not Perman	the Bank.) If assistance on the cently Unfit for seafuce in full to the SV	strength of the dearing profession	SB Account showing applicant ocuments submitted as above, a or my claim was found fraudul also authorize the SWF Society	nd at later ent, I
			olicant's Signature/	Thumb Impressi	on)	
Date:						
	1	Name of Applicant:				
Note 2: 1 Note 3: 1	nence date The date of as recorded The applica	of injury should be of injury of seafarer shall in the Indian CDC I	on or after 21.08.20 ould be within 12 n Book. istance should rece	 nonths period fro ive by the Societ 	ook and effective from 21.08.20 om the date of sign-off from the ty within two years period from	last vessel
١	erified & 1	FICE USE ONLY the applicant found e		under Invalidity	on NoDocuments a benefit scheme for financial ass	attached sistance of



DETAILS OF THE "FAMILY BENEFIT WELFARE SCHEME" FOR THE INDIAN SEAFARERS WITH EFFECT FROM 01.01.2019.

- 1. Pursuant to the objects of the Seafarers' Welfare Fund Society (hereinafter referred to as the Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the Indian seafarer as being eligible in terms of provisions of the rule 3 herein below, may be provided the financial assistance under "FAMILY BENEFIT WELFARE SCHEME" from 1st January 2019 under the circumstances and to the extent detailed herein below.
- 2. Such financial assistance to the Indian seafarer shall be provided, for the successful completion of Presea training course or Post-graduation degree/diploma as given below, by their son/daughter. At the absolute discretion of the society such financial assistance, may be dispensed with and / or curtailed or enhanced, suspended or completely withdrawn at any time without any prior notice. The availability of such financial assistance under the "Family Benefit welfare scheme" to the eligible Indian seafarer does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question.
- 3. Such financial assistance shall be provided to the Indian seafarer-
- (a) Whose son/daughter successfully completes the Pre-sea training course (GP rating/ CCMC/Deck & Engine Cadet including ETO), on or after 1.1.2019, from the Institute approved by the Directorate General of Shipping, Govt. of India and obtains the Indian CDC for joining seafaring profession.
- (b) Whose son/daughter successfully completes two years full-time post-graduation degree/diploma in any discipline other than Maritime stream, on or after 1.1.2019, from duly approved University by UGC/Deemed University/AICTE approved institute.
- Eligibility: The scheme is applicable to the Indian seafarer, who fulfils all the following conditions and is restricted to two children only.
- (i) He / She should have cumulative 6 months sea service after 01 .04.2014, preceding five years from the date of submission of claim application.
- (ii) He / She should have joined Indian flag vessel or engaged through registered RPS License holding company on Indian or Foreign flag vessel; and
- (iii) He / She should have an Indian CDC.

5. Quantum:

The quantum of financial assistance under this scheme shall be as under.

- (a) Where Indian Seafarer's son/daughter completes the Pre-sea training course & obtains the Indian CDC, the financial assistance under this scheme shall be Rs.25,000/- (Rupees Twenty five Thousand Only) in respect of son & Rs.50,000/- (Rupees Fifty Thousand Only) in respect of daughter and it will be provided to the seafarer.
- (b) Where Indian Seafarer's son/daughter completes the two years full time post-graduation degree/diploma course in any discipline other than Maritime stream, the financial assistance under this scheme shall be Rs.10,000/- (Rupees Ten Thousand Only) in respect of son & Rs.15,000/- (Rupees Fifteen Thousand Only) in respect of daughter and it will be provided to the seafarer.
- The Society may approach the Indian ship-owners/registered RPS Company concerned to obtain such particulars as may be necessary, for the purpose of payment of financial assistance envisaged under this scheme.
- 7. To receive the benefit under this scheme only such applications will be entertained which are submitted to the Seafarers' Welfare Fund Society within a period of twelve months after completion of course.
- Application for financial assistance under this scheme is to be made in the prescribed form along with self - attested copy of latest CDC book & copies of certificates.

Or

 Notwithstanding anything contained herein above in all doubtful/disputed and/or exceptional cases, the Committee of Management of the SWFS may examine and decide the cases, on case to case basis and its decision shall be final.

Note 1: The Committee of Management (COM) in its meeting dated 12/03/2025 has decided to provide the same amount, at par to the Children of seafarers. i.e. (i) Rs. 50,000/- for completion of pre-sea training course & (ii) Rs. 25,000/- for passing post-graduate two years full time degree / diploma from the University approved by the UGC / Deemed University / AICTE approved institute w.e.f. 01/04/2025. The other terms & conditions of this 'Family Benefit Schemes' remains same.



NAU BHAVAN, GROUND FLOOR, R, KAMANI MARG, BALLARD ESTATE, MUMBAI - 400 001

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER 'FAMILY BENEFIT SCHEME'

(ON COMPLETION OF POST-GRADUATE DEGREE/DIPLOMA COURSE BY SON / DAUGHTER) (Please refer notes given on next page before submitting this application form.)

1.	Seafarer's name in full (As per CDC Book)	:Mr./Mrs./Ms.	
2.	CDC number		
3.	Name of Son/Daughter (for whom claim submitted)		
4.	Post-Graduation Degree/Diploma Obtained (Two years Full time course)		
5.	Name of University/Institute		
6.	Date of completion of course		
7.	The Name of the vessel last Sign-off by the seafarer	:Date of sign-off	
8.	Indian ship-owners Co. name OR Recruitment & Placement Service (RPS) provider name RPSL No. & it's Registration No		
9.	Correspondence address		
10.	Telephone No/Mobile No.		
11.	E-mail address		
success	to inform you that my son / daughter M ifully completed the te Degree/Diploma course) form d University approved by UGC/Institute ap	(na	has me of the two years full time Post(name of University /
rules as under th	request you to grant me, the financial assists applicable for the scheme. I am support the scheme.	rting herewith follow	wing document, to receive the claim
(b) Se	elf - attested copy of latest CDC book (of the lf -attested copy of the Certificate issued latested la		
			P.T.O2



I give below my Bank account details. (Bank details are mandatory, without which the application will not be processed.)

Details of the bank, where the financial assistance amount to be credited (mandatory):

Name of the bank	Branch Name	Branch address	S.B. A/c no.	Branch IFSC code
	gible copy of the fro plicant's name and ba		book of SB accoun	t Or original cancelled
and at later date, if	it is proved, that I a		ficiary, or my claim	nts submitted as above, was found dishonest, I
Place :	_			
Date :	_	(Applicant's Sign	nature or Thumb Impr	ression)
	Nam	e of Applicant:		
two years post grade AICTE approved In Note 3: The applica	uate degree / diploma stitute. nt seafarer should hav	course on or after 1.1	2019 from the UGC a	ve six months sea
		rs from the date of sub RPS License holding		
	tion for financial assist of successful comple	stance should be receive	ved by the Society wit	hin twelve months
FOR S.W.F.S. OF	FICE USE ONLY		Application No.	
		icant found eligible / r		
Checked by D.A.	<u>v</u>	erified by (A.A.O.)	Recomm	ended by (CAAO)
		Approved by MT/M	<u>s.</u>	

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SEAFARERS' WELFARE FUND SOCIETY. NAU BHAVAN, GROUND FLOOR, R, KAMANI MARG, BALLARD ESTATE, MUMBAI - 400 001

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER FAMILY BENEFIT SCHEME

(ON COMPLETION OF PRE-SEA TRAINING COURSE BY SON / DAUGHTER OF SEAFARER) (Please refer notes given on next page before submitting this application form.)

1.	Seafarer's name in full : Mr./Mrs./Ms (As per CDC Book)	-			-		
2.	CDC number		:	17-			
3.	Name of Son/Daughter (for whom claim submitted)	:					
4. 5.	Pre-Sea training course & Institute 1 Date of completion of course	Name :	:				
6.	CDC No. of son/daughter		:				
7. 8.	Date of sign-off Indian ship-owners Co. name		:			-	
0.	OR Recruitment & Placement		M/s.				
	Service (RPS) provider name						
	RPSL No. & it's Registration No.						
9.	Correspondence address		:				
10.	Telephone No/Mobile No.		:				
11.	E-mail address						
	e undersigned, wish to inform you that and obtained Indian CDC	my son	/ daught	er has comple	eted the Pre-se	a training cour	se on
rules	w request you to grant me, the financial as applicable for the scheme. I am sup or the scheme.	assistar porting	nce unde herewith	r the 'Family n following de	Benefit Schen ocument, to re	ne' SWF Socie ceive the claim	ty's
(d)	Self - attested copy of latest CDC book Self -attested copy of the Certificate for which is approved by the Directorate C	or compl General	letion of of Shipp	Pre-sea traini ing.		- 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	tute,
(e)	Self-attested copy of the Indian CDC	Book of	btained b	y the Seafare	r's son/daught		
						P.T.O2	



I give below my Bank account details. (Bank details are mandatory, without which the application will not be processed.)

Details of the bank, where the financial assistance amount to be credited (mandatory):

Name of the bank	Branch Name	Branch address	S.B. A/c no.	Branch IFSC code
	gible copy of the fr plicant's name and b		s book of SB acco	unt Or original cancelle
declare that I am	claiming this financ	ial assistance on the st		nents submitted as abov
		am not the actual ben nce in full to the SWF		m was found dishonest,
Place:	_			
Date:	_			
		(Applicant's Sig	nature or Thumb In	pression)
	Nai	me of Applicant:		
the pre-sea training		1.1.2019 from the DG		as successfully complete e and obtained the India
	ation for financial a e of successful comp		eceived by the Socie	ety within twelve month
FOR S.W.F.S. OF	FICE USE ONLY		Application N	0
		plicant found eligible /	15.75	family Benefit Scheme'only)

Approved by MT/MS.

PM.

MATERNITY BENEFIT SCHEME

DETAILS OF THE 'MATERNITY BENEFIT SCHEME' FOR THE INDIAN FEMALE SEAFARER.

- 1. Pursuant to the objects of the Seafarers' Welfare Fund Society (herein after referred to as the Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the *Indian female* seafarer, as being eligible in terms of provisions of rule 3 herein below, may be granted the financial assistance under the 'Maternity Benefit Scheme', under the circumstances and to the extent detailed herein below.
- 2. Such financial assistance under the 'Maternity Benefit Scheme' to the *Indian female* seafarer, shall be paid at the absolute discretion of the society and such financial assistance may be dispensed with and / or curtailed /enhanced, suspended or completely withdrawn at anytime without any prior notice. The availability of *such financial assistance under the 'Maternity Benefit Scheme'* to eligible *Indian female* seafarer, during off article period, does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question.

3. Eligibility.

The scheme is applicable to *those Indian female* seafarers, *holding CDC book*, who are *last* recruited / engaged by the Indian shipowners or through registered RPS, for either Indian or foreign flag vessels, before the delivery date.

The *financial assistance under* the 'Maternity Benefit Scheme' shall be granted to the *Indian female* seafarer, for delivery, on or after 21.08.2014, within off articled period of 60 months, from the last sign-off from ship.

Such financial assistance shall be paid, only for two deliveries, to the eligible Indian female seafarer.

4. Quantum.

The quantum of financial assistance under this scheme shall be ₹.25,000/- (₹Twenty five thousands only) to the eligible *Indian female* seafarer, restricted to maximum of two deliveries.

- 5. The Society may approach the Indian ship-owners /registered RPS Company concerned and obtain such particulars as may be necessary for the purpose of payment of financial assistance envisaged under this scheme.
- 6. To receive the *financial assistance* under this scheme, only such applications will be entertained, *which* are submitted to the Seafarers' Welfare Fund Society, within a period of *two* years, from the date of delivery.
- 7. Application for financial assistance under this scheme is to be made in the prescribed form, alongwith attested copy of Birth Certificate of the Child/ report of the medical practitioner and original CDC Book.
- 8. Notwithstanding anything contained herein above in all doubtful/disputed and/or exceptional cases, the Committee of Management of the SWF Society may examine and decide on case to case basis, and its decision shall be final.

Per

Nou Bhavan, Ground Floor, 10, R.K. Marg, Ballard Estate, Mumbai-400 001

Application form for Financial Assistance under 'Maternity Benefit Scheme'

(Please refer notes given below before submitting this application form.)

1	Indian woman Seafarers' Name in full (As per her CDC Book)	Mrs./Ms.
2	Indian CDC Book number	
3	Indian ship-owners co. name or Recruitment & Placement Service (RPS) provider Name & Regn. No.	
4	The Name of the Vessel last signed off	
5.	Correspondence address	
6.	Contact No. & email-id	

١.	the undersigned.	has undergone pregnancy	delivery which took	place on

I now request you to grant me, financial assistance under the 'Maternity Benefit Scheme', as per SWF Society's rules as applicable for the scheme. I am submitting herewith following documents, to receive the claim under the scheme. I give below my bank account details (Bank details are mandatory, without which the application will not be processed).

Sr. No.	Documents
1	Attested copy of birth Certificate of Child
2	Original latest Indian CDC Book of the Indian woman seafarer showing last sign-off vessel and date
3	Attested copy of latest Indian CDC Book



Name of the bank	Branch name	Branch address	S.B. A/c no.	Branch IFSC code
name, duly at I declare that and at later da from SWFS,	I am claiming this atte if it is proved the full to the SWF source of Income.	ch Manager of the bank financial assistance on at I was not eligible, I Society and also author	the strength of the docu	ccount showing applicant's ments submitted as above, financial assistance receive recover the same from me
		Name of A	Applicant:	
21.08.	2014 & hence date	of pregnancy delivery	an seafarer holding CDC should be on or after 2 r two pregnancy deliver	
		elivery should have tak s recorded in the India		onths from the date of sign
	pplication for finar te of birth of the ch		receive by the Society w	vithin two years period from

Checked by D.A. Verified by (A.A.O.) Recommended by (CAAO) Approved by MT/MS.

Hr.

DETAILS OF THE "OLD AGE BENEFIT" WELFARE SCHEME FOR THE INDIAN SEAFARERS WHO ATTAINS THE AGE OF 65 YEARS ON 1.1.2019 OR THEREAFTER

- 1. Pursuant to the objects of the Seafarers' Welfare Fund Society (hereinafter referred to as the Society) as defined in Article 3 (XV) of the Memorandum of Association of the Society, the Indian seafarer as being eligible in terms of provisions of the rule 3 herein below, may be provided the financial assistance under "OLD AGE BENEFIT" welfare scheme" to the Indian seafarer who attains the age of 65 years on 1st January 2019 or thereafter under the circumstances and to the extent detailed herein below.
- 2. Such financial assistance to the Indian seafarer on attaining 65 years on 1st January 2019 or thereafter shall be provided. At the absolute discretion of the society such financial assistance, may be dispensed with and / or curtailed of enhanced, suspended or completely withdrawn at anytime without any prior notice. The availability of such financial assistance under the "Old Age Benefit" welfare scheme to the eligible Indian seafarer does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question

3. Eligibility

The scheme is applicable to Indian seafarer who attains the age of 65 (sixty-five) years on 1st January 2019 or thereafter and fulfills all the following conditions:

- He / She should have last performed cumulative 6 months (six months) sea service after 01.04.2014 after the age of 55 years;
- (ii) He / She should have joined Indian flag vessel or engaged through registered RPS License holding company on Indian or Foreign flag vessels and
- (iii) He / She should have an Indian CDC, which has been duly cancelled.

4. Quantum"

The quantum of financial assistance under this scheme shall be Rs. 50,000/- (Rupees Fifty Thousand Only) to the eligible Indian seafarer.

- The Society may approach the Indian ship-owner / registered RPS company concerned to obtain such particulars as may be necessary, for the purpose of payment of financial assistance envisaged under this scheme.
- To receive the benefit under this scheme only such applications will be entertained which are submitted to the Seafarers' Welfare Fund Society within a period of twelve months after attaining the age of sixty-five years.
- Application for financial assistance under this scheme is to be made in the prescribed form along with original latest CDC book.
- Notwithstanding anything contained herein above in all doubtful / disputed and / or exceptional
 cases, the Committee of Management of the SWFS may examine and decide the cases, on case-tocase basis and its decision shall be final.



NAU BHAVAN, GROUND FLOOR, R. KAMANI MARG, BALLARD ESTATE, MUMBAI - 400 001

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER OLD AGE BENEFIT SCHEME'

(Please refer notes given on next page before submitting this application form.)

1.	Seafarer's name in full (As per CDC Book)	:	Mr./Mrs./Ms.
2.	CDC number & CDC Cancellation order no & date	:	
3.	Date of Birth as per CDC	:	
4.	The name of the vessel last sign-off	:	Date of sign-off
5.	Indian ship-owners Co. name OR Recruitment & Placement Service (RPS) provider name RPSL No. & it's Registration No.	÷	M/s
6.	Correspondence address	:	
7.	Telephone No/Mobile No.	;	*
8	E-mail address	÷	
	undersigned, wish to inform you that	I have	completed by 65 years (Sixty five Years) of age
I now rules under (f)	request you to grant me, the financia	pporting	ance under the 'old Age Benefit Scheme' SWF Society's gherewith following document, to receive the claim by of CDC Book. P.T.O2
			1.1.0

W.

I give below my Bank account details. (Bank details are mandatory, without which the application will not be processed.)

Details of the bank, where the financial assistance amount to be credited (mandatory):

Name of the bank	Branch Name	Branch address	S.B. A/c no.	Branch IFSC code
cheque showing ap I declare that I am and at later date, if undertake to refund Place: Date: Note 1: This schem 65 years of age on o	plicant's name and ba claiming this financia f it is proved, that I a the financial assistant Name is applicable only f or after 1st January, 2	(Applicant's Sig	eficiary, or my clai Society.	7
			ived by the Society	within a period of twelve
	FICE USE ONLY		Application N	0.
		licant found eligible /		
Checked by D.A.		Verified by (A.A.O	.) Reco	mmended by (CAAO)
		Approved by MT/	MS.	

'DEATH ON BOARD BENEFIT SCHEME'

DETAILS OF THE WELFARE SCHEME FOR THE 'DEATH ON BOARD BENEFIT SCHEME' FOR THE NOMINEE/S OF THE DECEASED INDIAN SEAFARER.

- Pursuant to the objects of the Seafarers' Welfare Fund Society (hereinafter referred to as the 'Society')
 as defined in Article 3(XV) of the Memorandum of Association of the Society, the nominee(s) of the
 Indian seafarer, as eligible under the provisions of Rule 3 below, may be granted financial assistance
 under the 'Death on Board Benefit Scheme' for death cases or presumed death cases on board, subject
 to the circumstances and extent detailed herein.
- The financial assistance under the 'Death on Board Benefit Scheme' for an Indian seafarer shall be granted at the absolute discretion of the Society. The Society reserves the right to dispense with, curtail, enhance, suspend, or completely withdraw such financial assistance at any time without prior notice.
- 3. The availability of financial assistance under the 'Death on Board Benefit Scheme' to eligible nominee/ies of a deceased Indian seafarer (death cases or presumed death cases on board) does not confer or create any prescriptive rights whatsoever, and shall not be subject to challenge.

4. Eligibility.

- (i) The scheme is applicable for all Bonafide employed / engaged Indian seafarers holding Indian CDC and is engaged through Indian Shipping Company / Indian Ship-owner on Indian flag vessel or engaged by the Registered RPSL Company on / Indian flag vessel/ foreign flag vessel.
- (ii) The death of seafarer has occurred while on board and also presumed death cases are also considered under this scheme. This scheme will cover any sort of death occurred on Board,
- (iii) The Bonafide of the seafarer who expired on board will be confirmed by the concerned Shipping Master, Government Shipping Office/Director Seamen's Employment Office, under whose jurisdiction the shipping company/RPSL company operates.
- (iv) The application form for this scheme is to be received by the SWFS within a period of 3 (three) months from the date of seafarer / reported missing.
- 5. Quantum. The Seafarers' Welfare Fund Society (SWFS) will provide financial assistance in the form of 'Ex-gratia support' of ₹.2,00,000 (Rupees Two Lakhs only) to the nominee of the deceased seafarer, who expired on or after 12th March, 2025, as per the nomination form filed with the company/RPSL company for the concerned vessel on which the death occurred.
- The Society may approach the Indian shipowners /registered RPS, company concerned and obtain such particulars as may be necessary for the purpose of payment of financial assistance envisaged under this scheme.
- To receive the benefit under this scheme only such applications will be entertained which are submitted to Seafarers' Welfare Fund Society within a period of three months from the date of death of the Indian seafarer.
- 8. Application for financial assistance under this scheme is to be made in the prescribed form, along with attested copy of death certificate and original CDC book.
- Notwithstanding anything contained herein above in all doubtful/disputed and/or exceptional cases, the Committee of Management of the SWFS may examine and decide the cases, on case-to-case basis, and its decision shall be final.

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(Autonomous Body of Ministry of Ports, Shipping and Waterways Government of India)

Nau Bhavan Building, Ground Floor, R. K. Marg, Ballard Estate, Mumbai - 400 001 T.No. 022 - 20826980, 22626981, Email: swfs1966@gmail.com

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER 'DEATH ON BOARD BENEFIT SCHEME'

(Please refer notes given below before submitting this application form.)

1.	Seafarer's name in full (As per CDC Book)	;	Mr./Mrs./Ms.:		
2.	CDC Number	3			
3.	The name of the vessel on Board	:	Date of sign-on:	Death of Dea	th
4.	Indian shipowners Co. name	:	-		
	OR Recruitment & Placement	:			
	Service (RPS) provider name	1	-		
	& its Registration No.	:			
5.	Applicant's name in full	:			
6.	Relationship with seafarer	:			
7.	Correspondence address	:			<u> </u>
	Of the applicant				
8.	Telephone No./Mobile No.	di.		Mobile o.:	
			(with STD code No.)		
I, t	he undersigned, wish to inform you			aghter /father/mother Mrs while on boa	
_	.				
(a) (b) (c)	Original latest CDC book /Arti	ate of the icle of A ntity pr	e seafarer. greement for engager roof of the applic	ment of vessel where dead cant (i.e. PAN card/V	h occurred.
(A	ttach a legible copy of front page of	Bank pa	ss book of SB accour	nt, to verify the details.)	
Na	me of the Bank Branch Name		Branch Address	S.B. A/c.No.	Branch IFSC Code
I d dat fin	eclare that, I am claiming this finar te, if it is found, that I am not the a ancial assistance in full to the SWF	ncial assi	istance on the streng neficiary, or my clain	th of the documents subr	nitted above, and at later
				oplicant's Signature/ Thumb Impres	ssion)
Da	te: Name	of Appl	icant:		
No					
Not	The scheme is applicable only for Indian Indian Ship-owner on Indian flag vessel of	n seafarers or engaged	holding Indian CDC an by the Registered RPSL	d is Bonafide engaged throug company on foreign flag vesse	h Indian Shipping Company / el / Indian flag vessel for cases

- of death on or after 01/04/2025.
- The scheme is applicable to cases of death of seafarer occurred while on board and also presumed death cases are considered under this scheme.
- The bonafide of the seafarer who expired on board will be confirmed by the concerned Shipping Master, Government Shipping Office/ Director Seamen's Employment Office, under whose jurisdiction the shipping company/RPSL company operates. The application form for this scheme is to be received by the SWFS within a period of three months



FOR S.W.F.S. OFFI	CE USE ONLY	Appli	cation No
Documents attached v	erified & the applicant f	ound eligible/not eligible under 'I	Death on Board Benefit Scheme' for
financial assistance of	₹ (Rup	ees	Only)
Checked by D.A.	Verified by (A.A.O.)	Recommended by (CAAO)	Approved by MT/MS



EX-GRATIA SUPPORT BENEFIT SCHEME (ESBS)

DETAILS OF THE WELFARE SCHEME 'EX-GRATIA SUPPORT BENEFIT SCHEME' FOR STRANDED / ABANDONED SEAFARERS FAMILY

Pursuant to the objects of the Seafarers' Welfare Fund Society (herein after referred to as the SWF Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the nominee(s) of the Indian seafarer, as being eligible in terms of provisions of rule 3 herein below, may be granted the financial assistance under the 'Ex-Gratia Support Benefit Scheme (ESBS) ', under the circumstances and to the extent detailed herein below.

1. Such financial assistance on being stranded / abandoned of an Indian seafarer shall be granted at the absolute discretion of the society and such financial assistance may be dispensed with and / or curtailed /enhanced, suspended or completely withdrawn at any time without any prior notice. The availability of such financial assistance under the 'Ex-Gratia Support Benefit Scheme' to the eligible beneficiary of the stranded/abandoned seafarer does not in any manner confer or create any prescriptive right whatsoever and shall not be called in question.

2. Eligibility.

The financial assistance under the 'Ex-Gratia Support Benefit Scheme' will be paid to the seafarer's next of kin of Standard/abandoned, by their owners/ employers/RPSL till their standard period or maximum of 12 months. The Seafarers Welfare Fund Society will obtain the Bonafide of Stranded seafarers' details from the Shipping Master i.e. from Govt. Shipping Office / Seamen's Employment Office / D.G. Shipping (Crew Branch), & on their confirmation about the date from which the seafarer stranded & the next of kin details / family details, the assistance shall be paid by the SWFS to the next of kin of the stranded seafarers, after two months from the date of being stranded/ abandonment.

3. Quantum.

The quantum of financial assistance under this scheme shall be ₹.10,000/- per month (Rs. Ten Thousand only Per month) or maximum of ₹.1,20,000/- (Rs. One lac Twenty Thousand only) for 12 months period, which will be paid as 'Ex-gratia support' to the Standard seafarer's family till their standard period.

- 4. The Ex-Gratia Support under this Scheme will be commenced only after 2 months from the date of being stranded/abandonment of seafarer or as directed by the Shipping Master / Director, Seamen's Employment Office / Deputy Director General of Shipping (Crew Branch).
- 5. For the clarification about stranded and abandonment of seafarers, the Society will follow the definition as given in ILO-MLC Rules.
- 6. The Seafarers Welfare Fund Society will obtain the Bonafide of Stranded seafarers' details from the Shipping Master i.e. Govt. Shipping Office OR Seamen's Employment Office OR Directorate General of Shipping (Crew Branch), and on their confirmation about the Bonafide employment of the seafarer and the date from which the seafarer stranded / abandoned & the nomination details / family details, the assistance shall be paid by the SWFS to the family of stranded seafarers.
- 7. Application for financial assistance under this scheme is to be made in the prescribed form along with documents as given in the application form to prove the eligibility and identity and submitted to the SWFS within 2 months from the date of being stranded/abandonment of the seafarer.
- 8. Notwithstanding anything contained herein above in all doubtful/dispute0d and/or exceptional cases, the Committee of Management (the COM) of the SWF Society may examine and decide the cases, on case-to-case basis, and its decision shall be final.

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(Autonomous Body of Ministry of Ports, Shipping and Waterways Government of India)
Nau Bhavan Building, Ground Floor, R. K. Marg, Ballard Estate, Mumbai-400 001
Tel No. 022 - 20826980, 22626981, Email: swfs1966@gmail.com

APPLICATION FORM FOR "EX-GRATIA SUPPORT BENEFIT SCHEME (ESBS) FOR FAMILY OF ABANADONED SEAFARERS"

(Please refer notes given on next page before submitting this application form)

	PART A : DETAILS OF THE STRANI	DED/ABANDONED SEAFARER
1)	Seafarer's Name in full	
2)	CDC Number (Attach copy of relevant page showing CDC No. & Name)	
3)	Date of being stranded/abandoned	
4)	Place/Port & Country where stranded/abandoned	
5)	Name of Vessel	
6)	Details of vessel/owner/shipping Co./RPSL Co. through which seafarer was engage.	
7)	Employment Contract Number & Duration (If available)	
Ī	PART B : DETAILS OF NEXT OF KIN /	FAMILY MEMBER APPLYING
1)	Full Name	Mrs. / Mr.
2)	Relationship with Seafarer	
3)	Address for Correspondence	
4)	Contact Number	
5)	Email ID (if any):	
6)	Aadhaar / Voter ID / Other ID Proof Number (Please attach copy of document self- attested)	
P	ART C: BANK DETAILS FOR FINANCI	AL ASSISTANCE (NEFT/RTGS)
1)	Name of Account Holder	
2)	Bank Name	
3)	Branch Name & Address	
4)	Account Type & Account Number	
5)	IFSC Code	
(Bar	nk Account should be in the name of applicant a (Copy of Bank Passbook showing nam	and it should be normal saving account)



PART D : DOCUMENTS TO BE ENC	CLOSED
Please tick the documents attached (self-attes	ted copies):
 Copy of Seafarer's CDC Proof of Employment (Contract / Letter of Appointment) ID Proof of Next of Kin (Aadhaar / Voter ID / Passport e Relationship Proof (Birth Certificate / Marriage Certificate) Cancelled Cheque / Bank Passbook copy Any other supporting documents: 	tc.)
PART E : DECLARATION	<u>ON</u>
I, hereby inform you that my son/daughter/spouse Mr./Ms	salary from(Date). rovide financial assistance. I understand a maximum of 12 months, or return we is true and correct to the best of my a may result in rejection of the a Support Benefit Scheme (ESBS) for ended by the Seafarers Welfare Fund
Signature of the Applicant:(and rela	tion with seafarer)
Name:	
Date: Place:	
For Office Use Only Date of Receipt: Verified by: Recommendation: Remarks: Approved by: Date:	
- Approved of	

OF.

(Autonomous Body of Ministry of Ports, Shipping and Waterways Government of India) Nau Bhavan Building, Ground Floor, R. K. Marg, Ballard Estate, Mumbai-400 001 Tel. No. 022 - 20826980, 22626981, Email: swfs1966@gmail.com

"FINANCIAL ASSISTANCE BY WAY OF AWARD TO CHILDREN OF SEAFARERS"

1. Objective:

Pursuant to the objects of the Seafarers' Welfare Fund Society (herein after referred to as the Society) as defined in Article 3(XV) of the Memorandum of Association of the Society, the child of the Indian seafarer, as being eligible in terms of provisions of rule 3 herein below, may be granted the 'Financial Assistance by Way of Award', to recognize and encourage academic excellence among the children of Indian under the circumstances and to the extent detailed herein below.

2. Scope of the Scheme:

The scheme shall cover children of seafarers who secure top position (First Rank) in the following academic categories:

- i. University Graduation Degree
- ii. Post-Graduate Degree examinations from UGC recognized Indian universities and Deemed Universities

3. Eligibility Criteria:

A. For the Seafarer:

- Must be an Indian seafarer holding Indian CDC.
- Must have completed a minimum of 1 year of service on board Indian or foreign-flag vessels.
- And must have sailed for minimum 6 months during past 5 years.

B. For the Child (Awardee):

- Must be the biological or legally adopted child of the eligible seafarer.
- · Must have appeared for and topped the relevant examination in the first attempt.
- Must produce a valid certificate issued by the examination authority confirming the top rank or highest marks.
- Must have completed the course from a recognized institution (as detailed under each category below).

4. Categories and Quantum of Award: ₹.25,000/-

- i. University Degree and Postgraduate Exams:
- Award: Rs. 25,000/-
- · Eligibility:
 - Children topping full-time final year undergraduate or Final Year Post-graduate degree examinations.
 - The course must be from an Indian University recognized by UGC or a Deemed University.
 - Mark sheets, rank certificate, and Bonafide certificates to be submitted as proof.

5. Number of Awards:

- Only one award per category / per academic year.
- In case of a tie (equal highest scores), the award may be shared or decided through additional meritbased criteria set by the Committee.

6. Application Procedure:

- · Applications must be submitted by the parent (seafarer) or the student with all required documents.
- · Application window: Within 3 months of the declaration of the examination results.
- · Documents Required:
 - Copy of seafarer's CDC with sea service details.
 - Marksheet and rank certificate of the child who topped the University, issued by the University / Deemed University.



- o Bonafide certificate from the institute / University.
- o Birth certificate of the Child for relationship proof.

7. Approval and Disbursement:

- · Applications will be screened by the Welfare Sub-Committee.
- Recommendations will be forwarded to the Member Secretary/ Chairman-SWFS for final approval.
- · Approved awards will be disbursed on the Seafarers Day / NMDC Celebration Ceremony

8. General Conditions:

- The decision of the Welfare Sub-Committee will be final in all matters relating to selection, eligibility, and disbursement.
- The Committee of Management of the SWFS reserves the right to amend, suspend, or cancel the scheme at any time.



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APPLICATIN FORM FOR "FINANCIAL ASSISTANCE BY WAY OF AWARD TO CHILDREN OF SEAFARERS"

(FOR STANDING FIRST ON COMPLETION OF GRADUATE DEGREE/POST GRADUATE COURSE BY SON/ DAUGHTER)
(Please refer notes given on next page before submitting this application form)

1.	Seafarer's Details					
1.	Full Name					
2.	Indian CDC Number					
3.	Indian ship-owners Co. name OR Recruitment & Placement Service (RPS) provider name RPSL No. & it's Registration No.	M/s				
4.	Sea Service in the Last 5 Years (Months)					
5.	Correspondence address					
6.	Telephone No. / Mobile No.					
7.	Email Address					
2.	Child's (Awardee's) Details					7
1.	Full Name					
2.	Date of Birth					
3.	Relationship with Seafarer		Biological	Leg	gally Adopted □	
4.	Course Completed					
5.	Degree Level		Undergraduate		Postgraduate	
6.	Name of the Institution/College					
7.	Name of the University					
8.	Year of examination in which top achieved	rank				
9.	Rank Secured / Marks Obtained					
10.	Date of Result Declaration					
	cuments to be Attached (Tick if at					
☐ Man ☐ Ran ☐ Bor	by of Seafarer's CDC with sea serving rksheet of final year examination ask certificate / Certificate confirming nafide certificate from the institution th certificate / Relationship proof	ig top pos				



4. Declaration & Re	equest by the Applica	<u>nt</u>						
L wish to inform you	that my son / daughte	r Mr./Ms		has				
I, wish to inform you that my son / daughter Mr./Mshas successfully completed the(name of the Graduate/Post-graduate								
Degree course) from(name of University / Deemed University								
approved by UGC/In	approved by UGC/Institute approved by AICTE) and stood First in the final examination conducted in							
(month)/Year) in the	University.							
I now request you to	grant me, the financial	reward of Rs.25,000/-	under the 'Award to	Children of the				
		iles as applicable for th						
	to receive the claim u	100000						
		(of the applicant seafar	er)					
		ued by the University/I		proved by UGC				
	•	ficate stating First rank		p. 0.100 by 0.00,				
I hereby declare that	the information provid	ded above is true and co	orrect to the best of m	y knowledge. I				
understand that any f	alse information or sup	opression of facts may	lead to disqualificatio	n from the scheme.				
I have read the terms	and conditions of the	scheme and agree to al	oide by them.					
		nt details. (Bank det						
application will not b	be processed.) where the	ne financial assistance t	to be credited. (Mana	latory)				
(NRE/NRO accoun	t is not accented):							
Name of the bank	Branch Name	Branch address	S.B. A/c no	Branch IFSC				
rame or the bank	Diamen , mine	274		code				
(Note: Attach a legib	le copy of the front pa	ge of Bank pass book o	of SB account OR orig	ginal cancelled				
	icant's name and bank							
Diagos								
Place: Date:								
Signature of Seafar	er (Parent):							
Signature of the Ch	ild:							
			71 1	6.11				
Note 1: This scheme	is applicable only for	Indian seafarers, whos post graduate degree c	e son/daughter succes	2025 from the LIGC				
approved University	Deemed University	& has secured first / To	on rank in the Univers	ity.				
Note 2: The applica	int seafarer should ha	ve Indian CDC and h	as performed cumula	ative six months sea				
service after 1.4.201	4, preceding five year	rs from the date of sul	bmission of claim ap	plication, form India				
flag vessel or engage	ed through registered R	PS License holding co	mpany on Indian / Fo	reign Flag vessel.				
Note 3: The applicat	ion for financial assist	ance should be receive	d by the Society with	in three months from				
the date of declaration	on of the result.							
FOR OFFICE USE	ONLY		Application No					
D		ant found aligible / not	eligible under 'Fami	v Renefit Scheme'				
Documents attached verified and the applicant found eligible / not eligible under 'Family Benefit Scheme' for financial assistance of Rs (Rs only)								
Tor Illianciai assistan				• /				
Received on:								
Verified by:								
Officials Decisions	☐ Approved ☐ Reject	ed						
Date of Approval:	☐ Approved ☐ Reject	cu						
Award Disbursed o	n:							
Authorized Signatu	Authorized Signature:							

