## **ZCZP INSTRUMENT APPLICATION FORM**

(Private & confidential, not for circulation)

To:			Application Form No.:							
Board of Directors,	, · · · · · · · · · · · · · · · · · · ·									
Foundation To Educate Girls Globally			ISIN No. INS	S0SYW12017						
		, Tolstoy Lane, Janpath,								
Central Delhi, New Delhi, Delhi - 110001, India. CIN.: U80900DL2007NPL171093										
Contact Person: M		Savana								
	Chief Financial O									
Website: www.educategirls.ngo										
Tel: 22 4893 2226										
Email: info.in@edu	categirls.ngo									
Sir/Madam,										
Sub: Application fo	or subscription o	f ZCZP (zero coupon zero	o principal) Instr	ruments of face value of ₹1/- each.						
Having read and un	derstood the terr	ns of issue and the instru	ctions based on t	he Final Fund Raising Document dated March						
Having read and understood the terms of issue and the instructions, based on the Final Fund Raising Document dated March 12, 2024, I/we apply for the allotment of ZCZP instruments to me/us. The application is an irrevocable offer by me/us. The										
				mand draft for the same amount attached, On						
			Subscribers. I/W	Ve bind myself/ourselves by the provisions as						
contained in the Final Fund Raising Document.										
In Figures In words		-	Date:							
	In Figure	s In word	2.	Date:						
	In Figure	s In word								
No. of Instruments.	In Figure	s In word		FOR OFFICE USE ONLY Date of receipt of application						
No. of Instruments. Amount (Rs).	In Figure	s In word		FOR OFFICE USE ONLY						
	In Figure			FOR OFFICE USE ONLY Date of receipt of application Sl. No:						
		I am/we		FOR OFFICE USE ONLY Date of receipt of application						
Amount (Rs).  PAYMENT DETA	ILS (IN CAPITA	I am/we		FOR OFFICE USE ONLY Date of receipt of application Sl. No:						
Amount (Rs).  PAYMENT DETA  If, paid through Che	ILS (IN CAPITA	I am/we L LETTERS) aft:	e are applying as (	FOR OFFICE USE ONLY Date of receipt of application Sl. No:  (Tick) whichever is applicable						
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Amount (Rs).  PAYMENT DETA  If, paid through Che  (Please draw the C  Drawn on  If, paid through Dir  Bank Account No.:	Cheque/Demand Cheque/Demand Cheque/ I DD No.	I am/we LL LETTERS) aft: Draft in favour of: Four Date Amount (in Rs.) CH / NEFT / RTGS, details: 1427541	Category of In Company ( Mutual Fund ( If, Others pleas	Tick) whichever is applicable  Tick) whichever is applicable  Tick Globally - Escrow A/c)  vestor:  ) Society/ Trust () ) Others ()  e Specify:						
Amount (Rs).  PAYMENT DETA  If, paid through Che (Please draw the Control of the	Cheque/Demand Cheque/Demand Cheque/Demand Cheque/ I DD No.  ect Credit / NAC 57500001 ch HDFC B	I am/we LL LETTERS) aft: Draft in favour of: Four Date Amount (in Rs.) CH / NEFT / RTGS, details: 1427541	Category of In Company ( Mutual Fund ( If, Others pleas S: Motwane Marg G	Tick) whichever is applicable  Ate Girls Globally - Escrow A/c)  vestor:  ) Society/ Trust () ) Others ()						

UTR Number:

APPLICANT'S NAME IN FULL				Name of father/ husband	Sex	Age			
Sole /First									
Address:									
Diama Na				•••••		•••••			
Phone No:									
E-mail :									
Applicants Depository Account Details: NSDL CDSL									
<u>DP / CLIENT ID:</u>									
For NSDL enter 8 digit I	OP ID followed by 8 di	igit Client ID /	for CDS	L enter 16 digit Client ID					
Applicant PAN SIGNATURE OF THE					PLICANT				
Tear Here									
		ACKNOWLI	EDGEME	NT					
DP Id /Client ID:									
Sole / First Applicant :									
Address for	PAYMENT DETAILS	S (IN CAPITAL LETTERS)				Receiver's			
<u>Correspondence:</u> Foundation To	If, paid through Cheque/Demand Draft					Stamp			
Educate Girls	drawn on Cheque/ Date		Amount (in Rs.)						
Globally	diawiron	DD No.	Date	Amount (in R3.)					
C 103/ C 104, 1st									
Floor, Remi Bizcourt, Shah Industrial Estate,	If naid through Dir								
Off Veera Desai Road,	If, paid through Direct Credit / NACH / NEFT / RTGS , details :  Bank Account No.:								
Andheri(W), Mumbai - 400053, Maharashtra,	Bank Name & Branch:								
India.	UTR Number :								
	Please draw the Cheque/Demand Draft in favour of:					Received on			
	Trease draw the chec								
	Foundation to Educ	scrow A/c							
	·								

Note: Cheques and Demand Drafts are subject to realization.

## **Note/Terms:**

- 1. Name of sole/first applicant should be exactly the same as it appears in the depository records.
- 2. The entire Application Amount will be payable at the time of submission of the Application Form.
- 3. Only the first Applicant is required to sign the application form/ revision form. Thumb impressions and signatures other than in the languages specified in the Eighth Schedule to the Constitution of India must be attested by a Magistrate or a Notary Public or a Special Executive Magistrate under official seal.
- 4. Each Application should be for a minimum of ₹ 10,000, i.e., 10,000 ZCZP Instruments and in multiples of ₹ 1 (1 ZCZP Instrument) thereafter. Applicants can apply for the ZCZP Instruments offered hereunder provided the Applicant has applied for minimum application size using the same Application Form.
- 5. In case of payment by way of cheque / demand draft, the same shall be attached to the Application Form.
- 6. In case the Applicant has transferred the Application Amount by way of direct credit / NACH/ RTGS / NEFT to the Escrow Account, then the Applicant shall necessarily mention the UTR no. and date of such transferin the Application Form.
- 7. All Applications where payment is being made by cheque / demand draft should be submitted to the Registrar to the Issue before the Issue Closing Date. Further, Applications where payment is being made by direct credit / NACH / RTGS / NEFT should reach the Registrar to the Issue within 3 (three) Working Days from the Issue Closing Date.
- 8. Participation by any of the investor classes as mentioned in the Final Fund Raising Document in the Issue will be subject to applicable statutory and/or regulatory requirements. Applicants are advised to ensurethat applications made by them do not exceed the investment limits or maximum number of ZCZP Instruments that can be held by them under applicable statutory and/or regulatory provisions.
- 9. Applications should be made in single name. Applications should be made by Karta in case the Applicant is an HUF. If the depository account is held in joint names, the Application Form should contain the name and PAN of the person whose name appears first in the depository account and signature of only this person would be required in the Application Form.
- 10. This Applicant would be deemed to have signed on behalf of joint holders and would be required to give confirmation to this effect in the Application Form. Please ensure that such Applications contain the PAN of the HUF and not of the Karta.
- 11. Applicants applying for Allotment must provide details of valid and active DP ID, Client ID and PAN clearly and without error. On the basis of such Applicant's active DP ID, Client ID and PAN provided in the Application Form, the Registrar to the Issue will obtain from the Depository the Demographic Details. Invalid accounts, suspended accounts or where such account is classified as invalid or suspended may not be considered for Allotment of the ZCZP Instruments.
- 12. All Applicants are required to tick the relevant column in the "Category of Investor" box in the Application Form.