



भारत सरकार / GOVERNMENT OF INDIA

पत्तन, पोत परिवहन और जलमार्ग मंत्रालय

MINISTRY OF PORTS, SHIPPING AND WATERWAYS

समुद्रीय प्रशासन महानिदेशालय, मुंबई

DIRECTORATE GENERAL OF MARITIME ADMINISTRATION, MUMBAI

DGMA Circular 39 of 2026

F.N: 46/89/2026-ACCOUNTS-SWFS (Comp. No. : 40376

Date: 20.07.2026

Subject: Rationalisation and Consolidation of Welfare Schemes administered by Seafarers' Welfare Fund Society (SWFS)

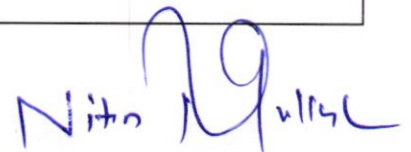
In supersession of DGS Circular No. 39 of 2025 dated 18.09.2025 and all other related instructions issued on the subject, the Director General of Maritime Administration hereby notifies the rationalised and consolidated Welfare Schemes administered by the Seafarers' Welfare Fund Society (SWFS), as approved by the Committee of Management (COM) of SWFS.

2. The revised schemes incorporate enhancement of financial assistance, expansion of coverage including off-article period benefits, and introduction of additional social security measures for Indian seafarers and their dependent family members.

3. The following Welfare Schemes shall be implemented with effect from the dates specified in the respective scheme provisions enclosed to this Circular:

1. **Survivor Benefit Scheme (SBS)** – Financial assistance to the family of a deceased Indian seafarer.
2. **Invalidity Benefit Scheme (IBS)** – Financial assistance to Indian seafarers declared permanently unfit for sea service.
3. **Family Benefit Welfare Scheme (FBWS)** – Financial support to dependent family members of Indian seafarers.
4. **Maternity Benefit Scheme (MBS)** – Financial assistance to eligible Indian women seafarers during maternity.
5. **Old Age Benefit Welfare Scheme (OABS)** – Financial assistance to eligible retired Indian seafarers upon attaining the prescribed age.
6. **Death on Board Benefit Scheme (DBBS)** – Financial assistance in cases of death or presumed death occurring on board a vessel.
7. **Ex-Gratia Support Benefit Scheme (ESBS)** – Additional financial assistance in specified cases of hardship.
8. **Award to Meritorious Child of Seafarers (ACSS)** – Educational incentive for meritorious children of Indian seafarers.
9. **Medical and Term Insurance Premium Assistance Scheme** – Partial reimbursement/support towards approved insurance premiums.
10. **Medical Support Scheme for Critical / Terminal Illness** – Financial assistance in cases of notified critical or terminal illness.

11. **Indian Certificate of Competency (CoC) Recognition and Career Progression Scheme**
– Assistance for professional advancement and certification recognition.
12. **Financial Assistance for Death or Permanent Disability in Warlike/High-Risk Areas (WRAS)**- Financial assistance shall be provided subject to prescribed conditions and eligibility criteria.
4. Detailed eligibility criteria, quantum of assistance, documentation requirements, application procedures and effective dates applicable to each scheme are provided in the Annexures enclosed to this Circular.
5. Claims arising from events occurring prior to the effective date specified for a particular scheme shall be governed by the provisions applicable on the date of occurrence of such event, unless otherwise expressly provided in the relevant scheme.
6. All pending claims shall be processed in accordance with the provisions applicable as per this Circular, subject to the effective date conditions specified therein.
7. All Recruitment and Placement Service (RPS) agencies, shipping companies, seafarers' unions, welfare associations, Maritime Training Institutes (MTIs) and other concerned stakeholders shall:
- Disseminate the contents of this Circular among Indian seafarers, including retired personnel and dependent family members;
 - Facilitate access to application forms and required documentation; and
 - Ensure that seafarers' contact and banking details are kept updated with SWFS to enable timely disbursement of benefits.
8. The detailed scheme documents and application formats are:
- Enclosed as Annexures to this Circular;
 - Available on the official website of the Directorate General of Maritime Administration (www.dgma.gov.in); and
 - Obtainable from the office of the Seafarers' Welfare Fund Society (SWFS), Nau Bhavan Building, Ground Floor, R.K. Marg, Ballard Estate, Mumbai – 400001.
Telephone: 8097553700 (Gratuity Section) / 8097552900 (Welfare Section)
Email:swfs.dgs@govcontractor.nic.in / swfs.srassit-dgs@govcontractor.nic.in
9. This is issued with the approval of the competent authority.



Capt. Nitin Mukesh
Dy. Nautical Advisor-cum-Senior DDG (Crew)

Encl.: As above

SEAFARERS' WELFARE FUND SOCIETY

The Seafarers' Welfare Fund Society (the SWFS) is set up by the Government of India, Ministry of Ports, Shipping & Waterways as a Central Organisation for providing welfare facilities to Indian seafarers and their families.

The SWFS is registered under the Societies Registration Act, 1860 on 16.11.1964 and also registered as a Trust under the Bombay Public Trust Act, 1950 on 9.4.1966, as a Charitable Society.

The Society is administratively under the control of the Ministry of Ports, Shipping & Waterways, Govt. of India, which nominates eminent members from the Indian shipping fraternity to the Committee of Management, which is the apex body for controlling the business, affairs, and management of the SWFS. The Director General of Maritime Administration is the Ex-officio Chairperson of the SWFS, and the other members, who are nominated by the Central Government, represent Indian shipping companies, foreign shipowners, Indian seafarers, and Central Government officers.

The SWFS implements various welfare schemes for the seafarers and their families. The SWFS is also the custodian of the seafarers' gratuity fund.

Welfare Schemes:

1. Survivor's Benefit Scheme (SBS):

- ₹2,00,000 (for death occurred on or after 16.03.2016), ₹ 4,00,000 (for death occurred on or after 29.04.2024) and **₹6,00,000 (for death occurred on or after 27.01.2026).**
- Death within 24 months of the article period w.e.f. 29.04.2024 and (death within 36 months of the article period w.e.f. 27.01.2026).
- Paid to the nominee registered for the last voyage before death.
- The deceased seafarer should be last engaged through Indian Shipping Co./RPSL.
- Claim to be submitted within 3 years from the date of death.

2. Invalidity Benefit Scheme (IBS):

- ₹2,00,000 (for permanent disability on or after 16.03.2016) and ₹ 6,00,000 (for permanent disability on or after 29.04.2024 – Disability due to loss of limbs).
- Permanent unfitness due to accidental injury within 24 months of article period w.e.f. 29.4.2024 and **(amended to 36 months w.e.f. 27.01.2026)**
- Claim to be submitted within 3 years from the date of permanent disability.

3. Maternity Benefit Scheme (MBS):

- Only for Indian female seafarers having sea service through an Indian shipping company or RPS, within 60 months prior to delivery.
- ₹25,000 per delivery (maximum for 2 deliveries) and **(₹ 50,000/- for delivering on or after 27.01.2026).**
- Claim to be submitted within 2 years of delivery; delivery after 21.08.2014.

4. Family Benefit Welfare Scheme (FBWS):

- ₹50,000 (daughter or son of the seafarer) on completion of Pre-Sea training course from DGS approved Training Institute & obtains CDC & **(₹1,00,000/- for completion of course on or after 27.01.2026).**
- ₹25,000 (daughter or son of the seafarer) on completion of post-graduation full time 2 years Degree/Diploma course (other than maritime stream) approved by Indian University / AICTE. & **(₹ 50,000/- for completion of course on or after 27.01.2026).**
- The seafarer should have a minimum of 6 months of sea service after 01.04.2014.
- Application to be submitted within 12 months of course completion.

5. Old Age Benefit Scheme (OABS):

- a) ₹50,000 for seafarers holding Indian CDC and on completion of age 65 years on/after 01.01.2019.
- b) ₹1,00,000/- for seafarers holding an Indian CDC and on completion of 75 years of age (on or after 01.01.2026).
The seafarer should have minimum 6 months sea service after age 55 (post 01.04.2014) through Indian Shipping company or RPSL **(amended to minimum 6 months cumulative sea service after the age of 50 years for seafarer applying to 65 years scheme & w.e.f 1.1.2026 for applying 75 years scheme).**
- Indian CDC must be cancelled.

6. Death On Board Benefit Scheme (DBBS):

- ₹2,00,000 ex-gratia assistance to the nominee registered for the vessel.
- Any type of death on board or presumed death on board, on/after 12.03.2025.
- Amended to ₹6,00,000 (for death occurred on or after 24.03.2026)
- Indian CDC holder and Bonafide employment through Indian Shipping Co./RPSL.
- Application to be submitted within 3 months of death/missing.

7. Ex-Gratia Support Benefit Scheme (ESBS):

- ₹10,000/- per month ex-gratia support paid to the nominee for a maximum of 12 months or until the end of the period of abandonment of the seafarer, whichever is earlier, in respect of stranded/abandoned bonafide seafarers (amended to ₹20,000/- per month for families of seafarers abandoned/stranded on or after 01.01.2026).
- Applicable for stranded/ abandoned on or after 12.03.2025.
- Assistance is paid after 2 months of being stranded, based on confirmation from Government authorities.
- Application to be submitted within 2 months from the date of stranding/abandonment.

8. Award to Meritorious Child of Seafarers (ACSS):

- Cash award of ₹25,000/- paid for children of the seafarer, who top in full-time degree/ PG Degree course from Indian University (non-maritime).
- Application to be submitted within 2 months of university confirmation.

9. Medical & Term Insurance Premium Assistance Scheme



The Committee of Management (COM) has approved financial assistance to Indian seafarers in the form of reimbursement of insurance premiums for Medical Insurance, Critical Illness Cover, and Term Insurance policies taken on or after **01.01.2026**, for self and dependent family members.

Reimbursement: **Up to 50% of premium**, subject to:

- ₹3,000 – Medical Insurance
- ₹1,000 – Critical Illness Cover
- ₹1,000 – Term Insurance (**Maximum ₹5,000 per seafarer**)
- Reimbursement will be made against self-attested premium receipt and policy copy issued by IRDA approved insurance companies.
- Eligibility includes Indian CDC holders with minimum **6 months cumulative sea service** as prescribed.
- Application must be submitted **within 60 days before policy lapse**.

10. Medical Support Scheme for Critical/ Terminal Illness

The COM has approved a **one-time financial assistance** to seafarers suffering from critical or terminal illnesses as recognized by IRDA, effective from **01.01.2026**.

- Assistance amount: **₹2,00,000 (one-time)**
- Applicable only to Indian CDC holder seafarers (not family members).
- Minimum **6 months qualifying sea service** as prescribed.
- Mandatory medical certificate from a Central/ State Government Hospital (not older than 6 months).
- Application to be submitted **within 6 months** from date of medical certificate.
- Benefit is **admissible only once** in a lifetime.

11. Indian Certificate of Competency (CoC) Recognition & Career Progression Scheme

To encourage career advancement of rating seafarers, the COM has introduced a new scheme effective from **01.01.2026** for ratings becoming officers after obtaining Indian CoC.

- One-time financial assistance of **₹2,00,000** for obtaining the **first Indian CoC** (FG/ NCV).
- Applicable to rating seafarers passing Indian CoC examinations and promoted as officers.
- Only Indian CoC issued by Directorate General of Maritime Administration will be considered.
- Application to be submitted **within 12 months** of obtaining CoC.
- Benefit is admissible **only once**.

12. Financial assistance for death or permanent disability suffered by seafarers in warlike/high-risk areas Scheme

Under the SWFS “Death on Board” scheme, it is proposed to enhance financial assistance up to ₹10,00,000/- in cases of death or permanent disability in warlike/ high-risk areas, subject to prescribed conditions and eligibility criteria.



SURVIVOR'S BENEFIT SCHEME

DETAILS OF THE 'SURVIVOR'S 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's 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's Benefit Scheme'** to eligible **beneficiary(ies)** of deceased 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**, 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's 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) & (amended to 36 months w.e.f. 27/01/2026)** 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 Lacs 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.

Note 3: The amount of financial assistance has been enhanced to ₹. 6,00,000/- (Rupees Six Lacs only) w.e.f. 27/01/2026 for those death cases of seafarer who has expired on or after 27/01/2026, within off article period of 36 months from the date of sign off from the last vessel/ship as recruited/engaged by Indian Shipping company or through RPSL company.



SEAFARERS' WELFARE FUND SOCIETY

(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

Mob No. 8097552900 / 8097553700.

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER 'SURVIVOR'S BENEFIT SCHEME'

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

1. Seafarer's name in full : Mr./Mrs./Ms.: _____
(As per CDC Book)
2. CDC Number : _____
3. The name of the vessel last : _____ Date of sign-off: _____
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. : 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 _____.
(Delete whichever is not applicable.)

I, now request you to grant me, the financial assistance under the 'Survivor's 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.)**

- (a) Attested copy of death certificate of the seafarer.
- (b) Copy of latest CDC book.
- (c) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card/Aadhar 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 Manager of the bank.)

I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and at later date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place: _____

(Applicant's Signature/ Thumb Impression)

Date: _____

Name of Applicant: _____

Note:

- 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 off article period of 12 months (amended to 24 months w.e.f. 31/05/2022) & (amended to 36 months w.e.f. 27/01/2026) from the date of sign-off from the last vessel, as recorded in the Indian CDC Book.
- 3: The application for financial assistance should be received by the Society within three years period from the date of death of the seafarer.

FOR S.W.F.S. OFFICE USE ONLY

Application No. _____

Documents attached verified & the applicant found eligible/not eligible under 'Survivor's Benefit Scheme' for financial assistance of ₹. _____ (Rupees
_____ Only)

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



INVALIDITY BENEFIT SCHEME

DETAILS OF THE 'INVALIDITY BENEFIT SCHEME' FOR THE INDIAN SEAFARER WHO BECOME PERMANENTLY 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 loss of limbs by any an accidental injury that occurred on or after 21.08.2014, during off article period of 12 months (amended to 24 month w.e.f. 29/04/2024) & **(amended to 36 month w.e.f. 27/01/2026)**, 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.)**

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 for accidental injury which occurred on or after 31/05/2022 the time limit has been 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 2: 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 31/05/2022, within off article period of 24 months from the date of sign off from the last vessel/ship. **(amended to 36 months w.e.f. 27/01/2026)**

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SEAFARERS' WELFARE FUND SOCIETY.

(Autonomous Body of Ministry of Ports, Shipping and Waterways Government of India)
NAU BHAVAN, GROUND FLOOR, R.KAMANI MARG, BALLARD ESTATE, MUMBAI-400 001

Mobile No. 8097552900 / 8097553700

Email- swfs.dgs@govcontractor.nic.in / swfs.srassit-dgs@govcontractor.nic.in

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 Book Number	
Indian shipowners Co. name OR Recruitment & Placement Service (RPS) provider Name & Regn. No	
The name and date of the vessel last sign-off	
Correspondence address	
Telephone No. (with STD Code) / Mobile No.	Tel. No. _____ Mobile No. _____

I, the undersigned, have become **PERMANENTLY UNFIT**, for seafaring profession due to an accidental injury which took place on _____.

I now request you to grant me, financial assistance under the 'Invalidity 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.	Document
1	Copy of self-attested latest Indian CDC Book of the Indian seafarer showing last sign-off vessel name and date.
2	Copy of certificate issued by the DGS approved Medical Practitioner certifying the Indian seafarer "Permanently Unfit" for the seafaring profession due to loss of limbs.
3	Attested copy of discharge card/certificate and medical report card issued by the hospital (where the Indian seafarer was admitted for the treatment.)

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

(Note: Please attach a legible copy of the Front page of Bank Pass Book of SB Account showing applicant's name, duly attested by the Branch Manager of the Bank.)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date if it is proved that I am not Permanently Unfit for seafaring profession or my claim was found fraudulent, I undertake to refund the financial assistance in full to the SWF Society and also authorize the SWF Society to recover the same from me from my any source of Income.

Place: _____

(Applicant's Signature/ Thumb Impression)

Date: _____

Name of Applicant: _____

Note 1: This scheme is applicable only for Indian seafarers, holding CDC book and effective from 21.08.2014 & hence date of injury should be on or after 21.08.2014.

Note 2: The date of injury of seafarer should be within 12 months period from the date of sign-off from the last vessel as recorded in the Indian CDC Book. **(amended to 36 months w.e.f. 27/01/2026)**

Note 3: The application for financial assistance should receive by the Society within three years period from the date of certificate issued by the DGS approved medical practitioner.

FOR S.W.F.S. OFFICE USE ONLY

Application No. _____

Documents attached verified & the applicant found eligible/not eligible under Invalidity benefit scheme for financial assistance of ₹. _____. (₹. _____ only)

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

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 articulated 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 thousand only) & (₹ 50,000/- Fifty thousand only for the delivery taken place on or after 27.01.2026) 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, along with 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.



SEAFARERS' WELFARE FUND SOCIETY

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

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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	

I, 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	Copy of latest Indian CDC Book of the Indian woman seafarer showing last sign-off vessel and date
3	Attested copy of latest Indian CDC Book

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

(Note: Please attach a legible copy of the front page of Bank pass book of SB account showing applicant's name, duly attested by the Branch Manager of the bank.)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date if it is proved that I was not eligible, I undertake to refund the financial assistance received from SWFS, in full to the SWF Society and also authorize the SWF Society to recover the same from me from my any source of Income.

Place: _____

Date: _____ (Applicant's Signature/ Thumb Impression)

Name of Applicant: _____

Note 1: This scheme is applicable only for Indian woman seafarer holding CDC book and is effective from 21.08.2014 & hence date of pregnancy delivery should be on or after 21.08.14. The financial assistant under this scheme is restricted only for two pregnancy deliveries.

Note 2: The date of pregnancy delivery should have taken place within sixty months from the date of sign-off from the last vessel as recorded in the Indian CDC Book.

Note 3: The application for financial assistance should receive by the Society within two years period from the date of birth of the child.

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified & the applicant found eligible/not eligible under Maternity benefit scheme for financial assistance of ₹._____.(Rupees_____only)

Checked by D.A.

Verified by (A.A.O.)

Recommended by (CAAO)

Approved by MT/MS.

FAMILY BENEFIT WELFARE SCHEME

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 Pre-sea 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 Maritime Administration, 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.

4. **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 completed a minimum cumulative sea service of six (6) months during the preceding five (5) years from the date of submission of the 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.

6. 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.

8. 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.

9. 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.

Note 2: The Committee of Management (COM) in its meeting dated 27/01/2026 has decided to provide the same amount, at par to the Children of seafarers. i.e. (i) Rs. 1,00,000/- for completion of pre-sea training course (ii) Rs. 50,000/- 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.



SEAFARERS' WELFARE FUND SOCIETY

(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

Mob No. 8097552900 / 8097553700.

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

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		

I, wish to inform you that my son / daughter Mr./Ms _____ has successfully completed the _____ (name of the two years full time Post-graduate Degree/Diploma course) form _____ (Name of university / Deemed University approved by UGC/Institute approved by AICTE).

I now request you to grant me, the financial assistance under the 'Family Benefit Scheme' SWF Society's rules as applicable for the scheme. I am supporting herewith following document, to receive the claim under the scheme.

- Self - attested copy of latest CDC book (of the applicant seafarer).
- Self -attested copy of the Certificate issued by the University / Institute, which is approved by UGC / AICTE, along with the copy of mark sheet.

P.T.O. 2



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

(Note: Attach a legible copy of the front page of Bank pass book of SB account or original cancelled cheque showing applicant's name and bank details)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date, if it is proved, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place : _____

Date : _____

(Applicant's Signature or Thumb Impression)

Name of Applicant: _____

Note 1: This scheme is applicable only for Indian seafarers, whose son/daughter successfully completed the two years post graduate degree / diploma course on or after 1.1.2019 from the UGC approved University / AICTE approved Institute.

Note 3: The applicant seafarer should have Indian CDC and has performed cumulative six months sea service after 1.4.2014, preceding five years from the date of submission of claim application, from India flag vessel or engaged through registered RPS License holding company on Indian / Foreign Flag vessel.

Note 2: The application for financial assistance should be received by the Society within twelve months period from the date of successful completion of course.

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified and the applicant found eligible / not eligible under 'Family Benefit Scheme' for financial assistance of Rs. _____. (Rs. only)

Checked by D.A.

Verified by (A.A.O.)

Recommended by (CAAO)

Approved by MT/MS.



SEAFARERS' WELFARE FUND SOCIETY

(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

Mob No. 8097552900 / 8097553700.

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

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 (As per CDC Book)	:	Mr./Mrs./Ms. _____
2.	CDC number	:	
3.	Name of Son/Daughter (for whom claim submitted)	:	
4.	Pre-Sea training course & Institute Name)	:	
5.	Date of completion of course	:	
6.	CDC No. of son/daughter	:	
7.	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	:	

I, the undersigned, wish to inform you that my son / daughter has completed the Pre-sea training course on _____ and obtained Indian CDC No. _____ on _____

I now request you to grant me, the financial assistance under the 'Family Benefit Scheme' SWF Society's rules as applicable for the scheme. I am supporting herewith following document, to receive the claim under the scheme.

(c) Self - attested copy of latest CDC book (of the applicant seafarer).

(d) Self -attested copy of the Certificate for completion of Pre-sea training course, issued by the Institute, which is approved by the Directorate General of Maritime Administration.

(e) Self-attested copy of the Indian CDC Book obtained by the Seafarer's son/daughter.

P.T.O. 2.

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

(Note: Attach a legible copy of the front page of Bank pass book of SB account or original cancelled cheque showing applicant's name and bank details)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date, if it is proved, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place: _____

Date: _____

(Applicant's Signature or Thumb Impression)

Name of Applicant: _____

Note 1: This scheme is applicable only for Indian seafarers; whose son/daughter has successfully completed the pre-sea training course on or after 1.1.2019 from the DGS approved Institute and obtained the Indian CDC for pursuing the seafaring profession.

Note 2: The application for financial assistance should be received by the Society within twelve months period from the date of successful completion of course.

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified and the applicant found eligible / not eligible under 'Family Benefit Scheme' for financial assistance of Rs. _____.

(Rs. _____ only)

Checked by D.A.

Verified by (A.A.O.)

Recommended by (CAAO)

Approved by MT/MS.



OLD AGE BENEFIT SCHEME

DETAILS OF THE "OLD AGE BENEFIT" WELFARE SCHEME FOR THE INDIAN SEAFARER WHO ATTAINS THE AGE OF 65 YEARS ON 1.1.2019 & 75 YEARS ON 1.1.2026 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 & 75 years on 1st January 2026 or thereafter shall be provided. 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 "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

- A) 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:
- B) The scheme is applicable to Indian seafarer who attains the age of 75 (sixty five) years on 1st January 2026 or thereafter and fulfills all the following conditions
 - (i) He / She should have last performed cumulative 6 months (six months) sea service after 01.04.2014 after the age of 55 years; **(amended to minimum 6 months cumulative sea service after the age of 50 years for seafarer applying to 65 years scheme & w.e.f 1.1.2026 for applying 75 years scheme)**
 - (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

- i) The quantum of financial assistance under this scheme shall be ₹ 50,000/- in respect of seafarers who complete 65 years to the eligible Indian Seafarer.
 - ii) The quantum of financial assistance under this scheme shall be ₹ 1,00,000/- in respect of seafarers who complete 75 years on or after 1.1.2026 to the eligible Indian Seafarer.
5. 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.
 6. 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 or seventy five years.
 7. Application for financial assistance under this scheme is to be made in the prescribed form along with original latest 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.



SEAFARERS' WELFARE FUND SOCIETY

(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

Email- swfs.dgs@govcontractor.nic.in / swfs.srassit-dgs@govcontractor.nic.in

Mob No. 8097552900 / 8097553700,

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER OLD AGE BENEFIT SCHEME (OABS)

1. PERSONAL DETAILS

1. Full Name of Applicant : _____
2. Date of Birth : ____ / ____ / ____
3. Age (as on date of application) : _____ Years
4. Mobile No. : _____
5. Email ID (if any) : _____
6. Residential Address : _____

2. CDC DETAILS

1. Indian CDC Number : _____
2. Date of Issue of CDC : ____ / ____ / ____
3. Date of Cancellation of CDC : ____ / ____ / ____
4. CDC Cancellation Order No. : _____

3. SEA SERVICE DETAILS

Sr. No.	Name of Shipping Company / RPSL Company	RPSL No	Vessel Name	Rank	Period of Service	Total Sea Service
1						
2						
3						

4. ELIGIBILITY DECLARATION

I hereby declare that:

1. I have attained the age of 65 years on or after 01.01.2019.
2. I have performed minimum cumulative sea-service through Indian Shipping Company / RPSL Company after attaining the age of 50 years and post 01.04.2014.
3. I possess a duly cancelled Indian CDC.

4. I have enclosed CDC Cancellation Order issued by the Competent Authority.

5. BANK DETAILS

1. Name of Account Holder : _____
2. Bank Name : _____
3. Branch Name : _____
4. Account Number : _____
5. IFSC Code : _____
6. Cancelled Cheque Attached : Yes / No

6. LIST OF DOCUMENTS ENCLOSED

Sr. No.	Documents	Attached (Yes/No)
1	Copy of CDC Book	
2	CDC Cancellation Order	
3	Bank Passbook / Cancelled Cheque	

DECLARATION

I hereby declare that the particulars furnished above are true and correct. In case any information furnished by me is found false or incorrect, the Seafarers' Welfare Fund Society shall have the right to reject my application and recover any financial assistance granted.

Place : _____

Date : ____ / ____ / ____

Signature / Thumb Impression of Applicant

Note 1: "The Competent Authority/Committee has approved amendment in the eligibility criteria of the OABS Scheme regarding minimum cumulative sea-service. The revised provision stipulates that the applicant should have performed minimum cumulative sea-service through Indian Shipping Company or RPSL Company after attaining the age of 50 years and post 01.04.2014, instead of the existing provision requiring cumulative 6 months sea-service after attaining the age of 55 years."

FOR S.W.F.S. OFFICE USE ONLY

Application No. _____

Documents attached verified and the applicant found eligible / not eligible under 'Old Age Benefit Scheme' for financial assistance of Rs. _____ . (Rs. _____ only)

Checked by D.A.

Verified by (A.A.O.)

Recommended by (CAAO) Approved by MT/MS.



SEAFARERS' WELFARE FUND SOCIETY

(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

Mob No. 8097552960 / 8097553700.

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER

OLD AGE BENEFIT SCHEME FOR 75 YEARS

(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 & 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 M/s. _____
RPSL No. & it's Registration No. : _____
6. Correspondence address : _____

7. Telephone No/Mobile No. : _____
8. E-mail address : _____

I, the undersigned, wish to inform you that I have completed by 75 years (Seventy five Years) of age on _____ (after 1.1.2026)

I now request you to grant me, the financial assistance under the 'old Age Benefit Scheme' SWF Society's rules as applicable for the scheme. I am supporting herewith following document, to receive the claim under the scheme.

- (a) Self – attested copy of CDC Book.
- (b) Vessel copy of CDC book 6 months sea service after the age of 50 years.
- (c) Account details.

P.T.O.....2.....



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

(Note: Attach a legible copy of the front page of Bank pass book of SB account or original cancelled cheque showing applicant's name and bank details)

I declare that I am claiming this financial assistance on the strength of the documents submitted as above, and at later date, if it is proved, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place: _____

Date: _____

(Applicant's Signature or Thumb Impression)

Name of Applicant: _____

Note 1: This scheme is applicable only for Indian seafarers, holding Indian CDC and has completed his/her 75 years of age on or after 1st January, 2026 and has last performed cumulative six months sea service after the age of 50 years.

Note 2: The application for financial assistance should be received by the Society within a period of **twelve months** after attaining the age of seventy five years.

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified and the applicant found eligible / not eligible under "Old Age Benefit Scheme" for financial assistance of Rs. _____



'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.

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 nominee(s) of the Indian seafarer, as eligible under the provisions of Rule 4 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.
2. 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, DG Shipping (Crew Branch).
 - (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 death of the seafarer / reported missing.
5. **Quantum.** The Seafarers' Welfare Fund Society (SWFS) will provide financial assistance in the form of 'Ex-gratia support' of ₹6,00,000 (Rupees Six Lakhs only) to the nominee of the deceased seafarer, who expired on or after 23rd March 2026, as per the nomination form filed with the company/RPSL company for the concerned vessel on which the death occurred.
6. 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.
7. Application for financial assistance under this scheme is to be made in the prescribed form, along with attested copy of 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.
9. For cases of missing or death of seafarer on board prior to 22nd March 2026, the financial assistance will stand at Rs.2 Lakhs.



SEAFARERS' WELFARE FUND SOCIETY

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

(Registered Charitable Trust–Regn. No.F/1364/BOM)

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Mob No. 8097552900 / 8097553700,

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

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 : Mr./Mrs./Ms.: _____
(As per CDC Book)
2. CDC Number : _____
3. The name of the vessel on Board : Date of sign-on: _____ Death of Death _____
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. : Tel. No. _____ Mobile No.: _____
(with STD code No.)

I, the undersigned, wish to inform you that my husband/wife/son/daughter/father/mother Mrs./Mr./Ms. _____ expired on _____ while on board Vessel _____.

I, now request you to grant me, the financial assistance under the 'Death on Board 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.)**

- (a) Attested Copy of latest CDC book /Article of Agreement for engagement of vessel where death occurred.
- (b) Attested copy of any Identity proof of the applicant (i.e. PAN card/Voter's ID card/Aadhar 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,)

I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and at later date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place: _____

(Applicant's Signature/ Thumb Impression)

Date: _____

Name of Applicant: _____



Note:

1. The scheme is applicable only for Indian seafarers holding Indian CDC and is Bonafide engaged through Indian Shipping Company / Indian Ship-owner on Indian flag vessel or engaged by the Registered RPSL company on foreign flag vessel / Indian flag vessel for cases of death on or after 12/03/2025.
2. The scheme is applicable to cases of death of seafarer occurred while on board and also presumed death cases are considered under this scheme.
3. 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, DG Maritime Administration (Crew Branch).
4. The application form for this scheme is to be received by the SWFS within a period of three months from the date of death of seafarer / reported missing.

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified & the applicant found eligible/not eligible under 'Death on Board Benefit Scheme' for financial assistance of ₹. __. (Rupees _____ 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

1. 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.
2. 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.

3. Eligibility.

The financial assistance under the 'Ex-Gratia Support Benefit Scheme' will be paid to the seafarer's next of kin of stranded/ abandoned, by their owners/ employers/RPSL till their standard period or maximum of 12 months whichever is earlier. 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. Maritime Administration (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.

4. 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, whichever is earlier, which will be paid as 'Ex-gratia support' to the Standard seafarer's family. **(amended to ₹20,000/- p.m. for the family of those seafarers who are stranded/abandoned on or after 1.1.2026)**

5. 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 Maritime Administration (Crew Branch).
6. For the clarification about stranded and abandonment of seafarers, the Society will follow the definition as given in ILO-MLC Rules.
7. 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 Maritime Administration (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, as per rule 5 above.

8. 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.
9. Notwithstanding anything contained herein above in all doubtful/disputed 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.



SEAFARERS' WELFARE FUND SOCIETY

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

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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 STRANDED/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)	:	

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)	:	

PART C : BANK DETAILS FOR FINANCIAL ASSISTANCE (NEFT/RTGS)

1)	Name of Account Holder	:	
2)	Bank Name	:	
3)	Branch Name & Address	:	
4)	Account Type & Account Number	:	
5)	IFSC Code	:	

(Bank Account should be in the name of applicant and it should be normal saving account)
(Copy of Bank Passbook showing name, A/c. details be attached.)

PART D : DOCUMENTS TO BE ENCLOSED

Please tick the documents attached (self-attested copies):

- ☐ Copy of Seafarer's CDC
- ☐ Proof of Employment (Contract / Letter of Appointment), if available
- ☐ ID Proof of Next of Kin (Aadhaar / Voter ID / Passport etc.)
- ☐ Relationship Proof (Birth Certificate / Marriage Certificate etc.)
- ☐ Cancelled Cheque / Bank Passbook copy
- ☐ Any other supporting documents: _____

PART E : DECLARATION

I, hereby inform you that my son/daughter/spouse Mr./Ms _____ has joined MV _____, IMO no. __, on __ and the ship has been abandoned by the owners/operators and my son/daughter/spouse has not been paid salary from ----- Date). I am in dire need of funds to run my household and request you to provide financial assistance. I understand that financial assistance of Rs.10000 per month will be provided for a maximum of 12 months, or return of seafarer, whichever is earlier. **(amended to ₹20,000/- p.m. for the family of those seafarers who are stranded/abandoned on or after 1.1.2026)**

I, the undersigned, hereby declare that all information furnished above is true and correct to the best of my knowledge and belief. I understand that furnishing false information may result in rejection of the application and/or legal action as per law applicable.

I also acknowledge that the financial assistance under the "Ex-gratia Support Benefit Scheme (ESBS) for family of Abandoned Seafarer, is a purely discretionary support extended by the Seafarers Welfare Fund Society (SWFS) and that no prescriptive right is created through this application.

Signature of the Applicant: _____ (and relation with seafarer)

Name: _____

Date: _____

Place: _____

For Office Use Only

- Date of Receipt: _____
- Verified by: _____
- Recommendation: _____
- Remarks: _____
- Approved by: _____ Date: _____



SEAFARERS' WELFARE FUND SOCIETY

"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 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 merit-based 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.
 - Bonafide certificate from the institute / University.
 - 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.



SEAFARERS' WELFARE FUND SOCIETY

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

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APPLICATION 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

1.	Full Name		
2.	Date of Birth		
3.	Relationship with Seafarer	Biological ☐	Legally 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 rank achieved		
9.	Rank Secured / Marks Obtained		
10.	Date of Result Declaration		

3. Documents to be Attached (*Tick if attached*)

- ☐ Copy of Seafarer's CDC with sea service details
- ☐ Marksheet of final year examination
- ☐ Rank certificate / Certificate confirming top position
- ☐ Bonafide certificate from the institution
- ☐ Birth certificate / Relationship proof

4. Declaration & Request by the Applicant

I, wish to inform you that my son / daughter Mr./Ms _____
has successfully completed the _____ (name of the Graduate/Post-graduate
Degree course) from _____ (name of University / Deemed
University 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 Seafarers Scheme' as per SWF Society's rules as applicable for the scheme. I am attaching herewith following document, to receive the claim under the scheme.

- (a) Self - attested copy of latest CDC book (of the applicant seafarer).
- (b) Self -attested copy of the Certificate issued by the University/Deemed University approved by UGC, along with the copy of mark sheet and certificate stating First rank achieved.

I hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that any false information or suppression of facts may lead to disqualification from the scheme. I have read the terms and conditions of the scheme and agree to abide by them.

I give below **my Child's Bank account details**. (Bank details are mandatory, without which the application will not be processed.) where the financial assistance to be credited. (**Mandatory**)
(**NRE/NRO account is not accepted**):

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 OR original cancelled cheque showing applicant's name and bank details)

Place: _____

Date: _____

Signature of Seafarer (Parent): _____

Signature of the Child: _____

Note 1: This scheme is applicable only for Indian seafarers, whose son/daughter successfully completed the Final Year Undergraduate or final year of post graduate degree course on or after 12.3.2025 from the UGC approved University / Deemed University & has secured first / Top rank in the University.

Note 2: The applicant seafarer should have Indian CDC and has performed cumulative six months sea service after 1.4.2014, preceding five years from the date of submission of claim application, form India flag vessel or engaged through registered RPS License holding company on Indian / Foreign Flag vessel.

Note 3: The application for financial assistance should be received by the Society within three months from the date of declaration of the result.

FOR OFFICE USE ONLY

Application No.

Documents attached verified and the applicant found eligible / not eligible under 'Family Benefit Scheme' for financial assistance of Rs. _____. (Rs. _____ only)

Received on: _____

Verified by: _____

Remarks: _____

Officials Decision: ☐ Approved ☐ Rejected

Date of Approval: _____

Award Disbursed on: _____

Authorized Signature: _____



SEAFARERS' WELFARE FUND SOCIETY

Details / Rules for Career Progression Scheme for Indian Rating Rating to Officer Scheme

These rules may be called “**Indian Certificate of Competency (CoC) Recognition and Career Progression Scheme, 2026**”, for Indian rating.

1. Commencement

The scheme shall come into force with effect from **01 January 2026**.

2. Objective

The objective of the scheme is to **recognise Indian ratings who upgrade** their qualifications by obtaining an **Indian Certificate of Competency (CoC)** and become **Merchant Navy Officers**, and to encourage **skill upgradation and career advancement** of Indian rating seafarers.

4. Eligibility

4.1 The applicant must be a **rating seafarer** who has successfully passed the **Indian CoC Examination** under **STCW Regulations II/1, III/1 or III/6**, (or NCV) on or after **01.01.2026**, and has qualified to serve as an Officer in the Merchant Navy

4.2 The applicant must have held a **Certificate of Proficiency (COP)** under any of the following STCW Regulations prior to appearing for the CoC examination:

- Regulation II/4
- Regulation II/5
- Regulation III/4
- Regulation III/5
- Regulation III/7

4.3 Only **Indian Certificate of Competency (CoC)** issued by the **Directorate General of Maritime Administration**, Government of India, shall be considered under this scheme.

5. Nature and Quantum of Financial Assistance

5.1 The scheme provides **one-time financial assistance of ₹2,00,000/- (Rupees Two Lakhs only)**.

5.2 The assistance shall be admissible **only for obtaining the first Indian CoC** (Foreign-going or NCV).

6. Time Limit for Submission of Application

The application under this scheme as per format only shall be submitted **within twelve (12) months** from the date of issuance of the Indian CoC, along with all requisite documents.

7. Authority

The decision of the **Committee of Management (COM)** / Competent Authority of SWFS shall be **final and binding**.



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Application for One-time Financial Assistance for

Indian Certificate of Competency (CoC) Recognition and Career Progression Scheme

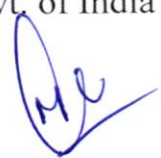
1. Personal Details

1. Name of Applicant Seafarer : _____
2. Indian CDC No. : _____
3. Date of Birth : _____
4. Present Address : _____

5. Mobile No. : _____
6. Email ID : _____

2. Certificate of Competency (CoC) and Certificate of Proficiency (CoP) Details

- a. Type of CoC (Tick ✓): ☐ Foreign-going ☐ NCV
- b. STCW Regulation under which CoC issued (Tick ✓):
☐ II/1 ☐ III/1 ☐ III/6
- c. CoC No. : _____
- d. Date of Issue : _____
- e. Issuing Authority : Directorate General of Maritime Administration, Govt. of India
- f. STCW Regulation under which the CoP held (tick ☐)
- g. Regulation II/4 ☐ Regulation II/5 ☐ Regulation III/4 ☐
Regulation III/5 ☐ Regulation III/7 ☐
- h. CoP No. _____
- i. Date of Issue : _____
- j. Issuing Authority : Directorate General of Maritime Administration, Govt. of India



4. Bank Details

1. Name of Account holder : _____
2. Name of Bank : _____
3. Branch : _____
4. Account No. : _____
(only SB a/c and not NRE/NRO)
5. IFSC Code : _____

5. Declaration

I hereby declare that:

- I have obtained my **first Indian Certificate of Competency** on or after 01.01.2026.
- I have **not availed** financial assistance earlier under this scheme.
- I understand that I shall **not be eligible** for financial assistance for any other CoC examination in future.
- The information furnished above is true and correct.

Signature of Applicant

Date: _____

Place: _____

7. List of Documents to be Enclosed (Mandatory Self attested)

1. Copy of Indian CDC
2. Copy of Indian CoC issued by DGS
3. Sea Service Testimonials (Rating & Officer)
4. Proof of Bank Account (Cancelled cheque / Passbook)
5. Aadhaar / Identity Proof



SEAFARERS' WELFARE FUND SOCIETY

Details / Rules for the Welfare Scheme Financial Assistance for Critical / Terminal Illness Scheme

These rules may be called “**One-time Financial Assistance for Critical / Terminal Illness Scheme, 2026**” of the Seafarers' Welfare Fund Society (SWFS).

1. Commencement

The scheme shall come into force with effect from **01 January 2026**.

2. Objective

To provide **one-time financial assistance** to eligible Indian seafarers suffering from **critical / terminal illness**, as approved by the Insurance Regulatory and Development Authority of India (IRDAI) as per their list.

3. Eligibility

3.1 The scheme is applicable **only to seafarers holding Indian CDC**.

3.2 The scheme is **not applicable to family members** of the seafarer.

4. Quantum of Assistance

Eligible seafarers shall be paid **one-time financial assistance of ₹2,00,000/- (Rupees Two Lakhs only)**.

5. Sea Service Requirement

(a) Active Seafarers (of any age):

Must have completed a **minimum cumulative sea service of six (6) months** during the **preceding five (5) years** through Indian Shipping Company, or RPSL prior to the **date of diagnosis of the critical / terminal illness**, duly certified by the **Central / State Government Hospital authority**.

(b) Seafarers above 50 years / Retired Seafarers:

Must have completed **minimum cumulative 6 months sea service after attaining the age of 50 years**, through: Indian Shipping Company or RPSL.

6. Medical Certification

6.1 The seafarer shall submit a **Medical Certificate** issued by a **Central / State Government Hospital**, which shall **not be older than six (6) months** prior to the **date of submission of the application** to the SWFS.

6.2 The Medical Certificate must:

- Certify that the seafarer is suffering from a **critical / terminal illness**.

6.3 Submission of the Medical Certificate is **mandatory**.

7. One-time Benefit Condition

If a seafarer has availed assistance **once** under this scheme for any critical / terminal illness, **no further claim** shall be entertained for any subsequent illness.

8. Time Limit for Application

Application under the scheme as per format only must be submitted **within six (6) months** from the date of issue of the Medical Certificate by the Central / State Government hospital.

9. Authority

The decision of the **Competent Authority / Committee of Management (COM)** of SWFS shall be **final and binding**.



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Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

Application for One-time Financial Assistance for Critical / Terminal Illness Scheme

1. Personal Details

1. Name of Seafarer : _____
2. Indian CDC No. : _____
3. Date of Birth : _____ Age _____
4. Present Address : _____
5. Mobile No. : _____
6. Email ID : _____

2. Service Details

1. Status (Tick ✓) :
☐ Active Seafarer ☐ Retired Seafarer
- Total Sea Service (relevant period): From : _____ To : _____
Total duration: _____ months _____
3. Name of Shipping Company / RPSL : (last served) _____

3. Medical Details

1. Type / Name of Illness (as per IRDAI approved list):

2. Name of Hospital issuing medical certificate (Central / State Govt.):

3. Date of Medical Certificate : _____
(Certificate not older than 6 months)



4. Bank Details (for DBT) Mandatory

(Kindly attach copy of bank pass book/ cancelled cheque)

1. Name of Account holder : _____
2. Name of Bank : _____
3. Branch : _____
4. Account No.
(only SB a/c and not NRE/NRO) : _____
5. IFSC Code : _____

5. Declaration

I hereby declare that:

- I am holding an **Indian CDC**.
- I have **not availed** one-time financial assistance earlier under this scheme.
- The information furnished above is **true and correct** to the best of my knowledge.
- I understand that if any information is found false, my application is liable to be rejected.

Signature of Seafarer

Date: _____

Place: _____

6. List of Documents to be Enclosed (self-attested)

1. Copy of Indian CDC
2. Original Medical Certificate from Central / State Govt. Hospital
3. Sea Service Testimonials / Discharge Book extracts
4. Proof of Bank Account (Cancelled cheque / passbook copy)



SEAFARERS' WELFARE FUND SOCIETY

Details / Rules for the Welfare Scheme

Medical / Critical Illness & Term Insurance Premium Assistance Scheme

1. Objective

To provide financial assistance to Indian seafarers by way of part reimbursement of insurance premium paid towards Medical Insurance, Critical Illness Insurance and Term Insurance policies for themselves and their dependent family members.

2. Effective Date

The scheme shall be applicable only for the above referred insurance policies taken **on or after 01.01.2026 from the IRDA approved Insurance Company.**

3. Nature of Assistance

Financial assistance shall be provided in the form of part **reimbursement of insurance premium** paid by the eligible seafarer, as approved by the management of the SWFS.

4. Quantum of Assistance

Reimbursement shall be limited to a maximum of **50% of the insurance premium paid**, subject to the following ceilings:

Type of Insurance	Maximum Reimbursement
Medical Insurance Policy	₹3,000
Critical Illness Cover	₹1,000
Term Insurance Cover	₹1,000
Total Maximum Assistance	₹5,000 per seafarer

5. Eligibility Criteria

An applicant must satisfy all the following conditions:

- Must be an **Indian seafarer holding a valid Indian CDC.**
- Active seafarers (of any age)** should have completed a **minimum cumulative sea service of six (6) months** during the **preceding five years** at the time of submission of application either:
 - through an Indian Shipping Company, or
 - through an RPSL-approved company.

c) Seafarers aged above 50 years as on 01.01.2026 or retired seafarers of any age must have completed a **minimum cumulative sea service of six (6) months after attaining the age of 50 years**, through an Indian Shipping Company or RPSL.

d) The insurance policy (Medical / Critical Illness / Term) must be obtained **only from an IRDA-approved Insurance Company**.

6. Documents Required

The following documents shall be submitted along with the application:

- a) Self-attested copy of the **Insurance Policy document**.
- b) Self-attested copy of the **Insurance Premium Paid Receipt**, issued by an IRDA-approved Insurance Company.
- c) Copy of **Indian CDC**.
- d) Proof of sea service (as applicable).
- e) Bank details for reimbursement. **(Should be a normal savings account and NOT be NRE/NRO account)**

7. Time Limit for Submission

The application along with all requisite documents must be submitted within 180 days of issue **of the insurance policy**.

8. Mode of Disbursement

The reimbursable amount, as approved by the Competent Authority, shall be credited directly to the bank account of the seafarer.

9. Authority

The scheme shall be implemented as approved by the **Committee of Management (COM)** and administered by SWFS as per prescribed procedure.



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Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

APPLICATION FORM FOR FINANCIAL ASSISTANCE UNDER Medical, Critical Illness & Term Insurance Premium Assistance Scheme

1. Applicant Details

1. Name of Seafarer : _____
2. CDC Number : _____
3. Date of Birth : _____
4. Age as on 01.01.2026 : _____
5. Mobile No. : _____
6. Email ID : _____

2. Sea Service Details

1. Total Sea Service (last 5 years): ____ years ____ months
2. Sea Service after age of 50 (if applicable): ____ months
3. Name of Shipping Company / RPSL: (Last served) _____

3. Insurance Details

Type of Policy	Name of Insurance Company	Policy No.	Policy Period	Premium Paid (₹)
Medical Insurance				
Critical Illness				
Term Insurance				

4. Bank Details (for reimbursement)

1. Name of the Account holder : _____
2. Name of Bank : _____
3. Branch : _____
4. Account Number : _____
(only SB a/c and not NRE/NRO)
5. IFSC Code : _____

5. Declaration

I hereby declare that the information furnished above is true and correct to the best of my knowledge. I undertake that the insurance policies submitted have been obtained from IRDA-approved Insurance Companies and that no reimbursement has been claimed earlier for the same policy.

Signature of the Applicant

Date: _____

Place: _____

List of Documents to be Enclosed (Mandatory Self attested)

- 1) **Copy of Indian CDC.**
- 2) **Sea service testimonials / Discharge Book extracts**, as applicable.
- 3) **Copy of the insurance policy/policies** for which the application is submitted.
- 4) **Copy of insurance premium payment receipt(s)** corresponding to the policy/policies applied for.
- 5) **Proof of bank account details** (Cancelled cheque or copy of passbook).



SEAFARERS' WELFARE FUND SOCIETY

Financial Assistance Scheme for Death or Permanent Disability of Seafarers in Warlike/High-Risk Areas

SWFS has been providing financial assistance of **₹2,00,000/ (Enhanced to Rs.6 lakhs from 23rd March 2026)**- under the existing "*Death on Board*" scheme to the Next of Kin (NoK) of seafarers who die or go missing while on board.

However, in cases where the ships are in Warlike Areas/High Risk areas, the operational risks are higher and in incident of death (or presumed dead) of seafarer, the claim settlement can take some time.

It is proposed that:

- In cases where death of a seafarer (or presumed dead) occurs in a Warlike or High Risk Area, The financial assistance to NoK may be **enhanced to ₹10,00,000/- (Rs.10 Lakhs only)** (in place of ₹2,00,000/-).
- In cases where a seafarer, who has become permanently unfit, for the seafaring profession, due to loss of limbs by any an accidental injury that occurred in the Warlike or High Risk area, a one time financial assistance of Rs.10,00,000/- (Rs.10 Lakhs only) be granted to the seafarer.

Scope & Duration: Present Warlike area or high risk areas where the scheme is applicable are:

- **Persian/Arabian Gulf, Gulf of Oman, Indian Ocean, Gulf of Aden and Southern Red Sea**
- The waters enclosed by the following boundaries:
 - a) On the northwest, by the Red Sea, south of Latitude 18°N;
 - b) On the northeast, from Pakistan coastline at 25°19'15"N, 65°E;
 - c) On the east, by a line to high seas point 10°48'N, 65°E, thence to high seas point 10°48'N, 60°15'E, thence to high seas point 6°45'S, 48°45'E;
 - d) and on the southwest, by the Somalia border at 1°40'S, 41°34'E, to high seas point at 6°45'S, 48°45'E;
- May be reviewed based on further developments

Eligibility

- 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.
- The death of seafarer has occurred while on board and presumed death cases are also considered under this scheme. This scheme will cover any type of death occurred on Board,
- 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, DG Maritime Administration (Crew Branch).
- Application for financial assistance under this scheme is to be made in the prescribed form. The application form for this scheme is to be received by the SWFS within a period of 3 (three) months from the date of death of the seafarer / reported missing.

- 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.
- 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.



SEAFARERS' WELFARE FUND SOCIETY

(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

Mob No. 8097552900 / 8097553700

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

Financial Assistance for Injury / Permanent Disability suffered by Seafarers in Warlike / High-Risk Areas Assistance Scheme

(A) General Details of Seafarer

Sr. No.	Particulars		Details to be filled
1	Name of Seafarer	:	
2	CDC Number	:	
3	Date of Birth	:	
4	Address (Permanent)	:	
5	Mobile No.	:	
6	Email ID	:	

(B) Employment Details

Sr. No.	Particulars		Details to be filled
7	Name of Shipping Company / RPSL	:	
8	Name of Vessel	:	
9	Type of Vessel (Indian/Foreign Flag)	:	
11	Rank / Designation	:	
11	Period of Employment (From – To)	:	

(C) Incident Details (Injury Case)

Sr. No.	Particulars		Details to be filled
14	Date of Incident	:	
15	Place of Incident (Warlike/High Risk Area)	:	
16	Nature of Injury	:	
17	Cause of Injury	:	
18	Whether Injury occurred On Board	:	Yes / No
19	Brief Description of Incident	:	

(D) Medical Details

Sr. No.	Particulars		Details to be filled
20	Name of Hospital	:	
21	Medical Certificate Attached	:	Yes / No
22	Nature of Disability (Permanent)	:	
23	Fitness Status (Fit/Unfit for Seafaring)	:	
24	Date of Medical Assessment	:	

(E) Financial Assistance Details

Sr. No.	Particulars		Details to be filled
25	Bank Name	:	
26	Account Number	:	
27	IFSC Code	:	
28	Branch	:	

(F) Documents Attached

Sr. No.	Document	Yes / No
29	Copy of CDC	
30	Medical Certificate	
31	Injury Report / Incident Report	
32	Employment Proof	
33	Bank Passbook Copy	
34	Any Other Document	

(G) Declaration

I hereby declare that the above information is true and correct to the best of my knowledge. I request SWFS to kindly consider my application for financial assistance.

Place :

Date :

Signature of Applicant



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Mob No. 8097552900 / 8097553700

Email- swfs.dgs@govcontractor.nic.in/ swfs.srassit-dgs@govcontractor.nic.in

Seafarer's Welfare Fund Society Application For Financial Assistance For Death Of Seafarer Under Warlike / High-Risk Areas Assistance Scheme

1. Seafarer's name in full : Mr./Mrs./Ms.: _____
(As per CDC Book)
2. CDC Number : _____
3. The name of the vessel on Board : Date of sign-on: _____ Death of Death _____
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 : _____
f 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 Mrs./Mr./Ms. _____ expired on _____ while on board Vessel _____.

I, now request you to grant me, the financial assistance under the '**Warlike / High-Risk Areas**' 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.**)

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.)

I declare that, I am claiming this financial assistance on the strength of the documents submitted above, and at later date, if it is found, that I am not the actual beneficiary, or my claim was found dishonest, I undertake to refund the financial assistance in full to the SWF Society.

Place: _____

(Applicant's Signature/ Thumb Impression)

Date: _____ Name of Applicant: _____

FOR S.W.F.S. OFFICE USE ONLY

Application No.

Documents attached verified & the applicant found eligible/not eligible under '**Warlike / High-Risk Areas**' for financial assistance of ₹. _____. (Rupees _____ Only)

Checked by D.A.

Verified by (A.A.O.)

Recommended by (CAAO)

Approved by MT/MS. fold age