**Application No.** 



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# APPLICATION FOR PRE-MATRIC SCHOLARSHIP FOR STUDENTS BELONGING TO MINORITY COMMUNITIES 2012-2013

	<u>Please tick (√)</u>	RESH RENEWAL Paste he attester signe for stud class passpo photog	d (to be ed by uardian lents of l to V) ort size
Na	me of School		
Pa	rt.I - Details of Student		
1.	Name of Student (In BLOCK LETTERS, Initial should be entered after the name)	:	
2.	Class in which the applicant is studying	:	
3.	Date of Birth [DD/MM/YYYY] (As per the school Record)	: / / /	
4.	Gender [Please (✓)]	: Boy Girl	
5.	Nationality	:	
6.	Name of Father/ Mother/Guardian (as applicable)	:	
	Relationship [Please (✓)]	Father Mother Guardian	
7.	Religion [Please (✓)]	: Muslim Christian Sikh Buddhist	Parsi
8.	Residential Address		
	House Name/No. City/Town/Village & P.O		
	District		
	Pincode	·	
	Mobile No. (If any)	·	
	、 <b>、</b>		

## N2/19410/12/DPI

9.	Annual Income of
	Parent/Guardian
	Total Annual Course Fee
	(Applicable for affiliated CBSE/ICSE,UN
	AIDED (Recognized )Schools only

Rs:	
Rs:	(To be filled by the Head of School)

#### 10. Documents to be enclosed with the application:

- (i) Affix a self attested passport size photograph.
- (ii) Income and community declaration should prepared in a plain paper for self employed parents/guardian OR income certificate from the employer for employed parents / guardian with separately prepared community declaration in a plain paper.

#### **11. Declaration:**

- (i) I hereby declare that the information given above is correct.
- (ii) I am not availing any other scholarship for this purpose from any other source.
- (iii) I shall abide by the terms and conditions for sanction of the Pre-matric Scholarship.
- (iv) I undertake that if, at any stage, it is found to the satisfaction of the sanctioning authority in the concerned State Government that the information given by me is false or if I violate the terms and conditions of the scholarship, the scholarship sanctioned to me, may be cancelled and the entire amount of scholarship will be refunded by me or recovered from me, apart from such penal action as warranted.

Date: Signatu Place:			nature of the Stu	ure of the Student						Signature/Thump impression of student's parents/guardian for students of Class I to V										
Part. II [To be filled up by the Head of the School]																				
1.																				
2.	Types of Institution : [Please (✓)]																			
[	Gove	Government Aided Un Aided Recognized								Affiliated										
3.	Affiliation No. & Date : (Applicable for CBSE/ICSE schools only)																			
4.		led recognize the syllabus	ed/affiliated [Please (√)]	:		State				CBSE					ICSE					
5.	i. Bank Account details of School (i) Name of the Bank			:																
	(ii)	Branch Nan	ne	:																
	(iii)	Name of page	yee	:																
	(iv)	Account No	•	:																
	(v)	IFSC Code		:																

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### N2/19410/12/DPI

details with that school).

 Signature of Head of the School

 Name
 :

 Designation
 :

 Date :
 Name of School :

 Place :
 (Seal)
 Phone No.

∞.....

### **RECEIPT**

<b>Received the application of Pre-matric Scholarship Scheme 2012</b>	-13 in
the Category of FRESH/RENEWAL from	Std.
& Division	

Signature with Designation

Place Date

**School Seal** 

### N2/19410/12/DPI

#### DECLARATION OFPARENTS'/GUARDIAN'S INCOME (Specimen) (Should be prepared in plain paper)

I <u>(Name of father/mother/guardian)</u> F/o or M/o/or G/o <u>(Name of Pupil)</u> who is studying in Std.....at <u>(Name of School)</u> hereby declare that my annual income from all sources is Rs.<u>(in figures)/- (Rupees(in words)</u> only).

I <u>(Name of father/mother/guardian</u>) F/o or M/o or G/o (<u>Name of Pupil</u>) who is studying in Std.....at (<u>Name of School</u>) hereby declare that my son/daughter is belongs to (<u>caste/Religion</u>) of minority community.

If any stage, it is found that the information given by me is not true, all benefits given to the student under the scheme of "Pre-matric scholarship for students belonging to minority communities" could be withdrawn and legal action as deemed fit, may be taken against me or my ward.

Signature

Name:

(Father/Mother/Guardian)

Date:

Residential Address with phone No.