FRESH APPLICATION FORM FOR POST-MATRIC SCHOLARSHIPS TO SCHEDULED CASTE/SCHEDULED TRIBE STUDENTS OF BIHAR FOR THE YEAR 20 – 20

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Name of the Institute with address:					
Name of Class:	session:	Scholarship for the Year:			
Class:	Annual Income of the parent:				
Account No. of Student:					
Name of the Nationalized Bank with Branch:		IFS Code:			

N.B.: The students who are studying in the technical /Professional courses only outside the State and within the State will submit their application to Director, SC & ST Welfare Department, Govt. of Bihar and the students studying outside state in Non-Technical courses (10+2, I.A., I.Sc., I.Com, B.A., B.Sc, B.Com., M.A., M.Com., M.Sc.) will send their application form to DWO office of their home district and students who are studying in non-technical courses within the state will send their application to the DWO of the district where the Institute is situated. While submitting

Applicant must affix a passport size photograph with his/her signature thereon and it should be attested by the Head of the Institution

application form for sanction of Post-Matric Scholarship, the SC/ST students must submit the documents/papers along with the application form as per checklist prescribed at the bottom. In absence of any of the document as mentioned in the checklist, his/her application will summarily be rejected without intimation. Last date for submission of application form will be published in the leading dailies.

Application must be sent through the Head of the Institution.

10	The Director/District Welfare Officer							
Thr	ough							
	The Principal /Registrar							
	Website: E-mail.							
	Landline Mobile	• • • • • • • •						
	PART	Г-А						
	(To be filled in by the applicant i		and clear handwriting)					
1.	Name in full (in capital letters) : Shri/Kumari/Smt	• • • • • • • • • • • • • • • • • • • •						
	Landline No Mob	ile						
	E-mail							
2.	Date of Birth (in Christian era)	:						
3.	(a) Caste and Sub-Caste (S.C.)	:						
	(b) Tribe and Sub-Tribe (S.T.)							
4.	Religion	:						
5.	State where permanently settled	:						
	District/Subdivision/Block/Police Station	:						
	Full Permanent Address :							
6.	Father's/Husband's name in full	:						
7.	Whether parents are employed	:	Yes/No					
	If yes, whether: -							
	(a) Govt. Sector/ Private Sector	:	Monthly emolument					
	(Salary Certificate from the employer must be attach	ed)	•					
8.	Whether the applicant is in employment	:	Yes/ No					
	If yes, whether: -							
	(a) Part-time/ Full time	:	Monthly emolument					

9.	or any other scheme in If yes, indicate- (i) Name of the scholars (ii) Course of study for	1						
10.	. (a) Whether the applicant has applied for or received any other scholarship/stipend or remuneration in this current session.							
	Scholarship as a stud during the session un Particulars of examina the Matriculation or ec attach attested copies	s applied for Post-Matric dent of any other institution ander this scheme tion taken commencing quivalent examination (P of certificates, mark shall career should be indicated	with lease neets.					
Nar	ne of Examination	Institution and University/ Board	Year in which taken	Whether pass if passed state and percentag	division	Remarks		
13.	Desired (ii) Duration of course (iii) Date of admission	which the scholarship is rear/ of final examination nostel of the institution.	: : :	es/No				
	(ii) Date of joining & co Seal and signature m	ertificate of the warden would be attached	ith					
15.	desired Student's Bank Accord	t branch of Nationaliz unt No				Scholarship		

IFS Code.

I/We hereby declare that I/We have read the regulation of the Scheme and agree to abide by the terms and conditions of award. I/We certify that the statements made in the application are correct and if any of them is found to be incorrect by the authority, his decision will be final and binding on me/us. I/We undertake to refund to the said authority on demand the entire amount of scholarship received by me/us or overpaid to me/us failing which the said authority may recover the amount from me/us through whatever means it deems proper.

	(i)	Signature of the applicant			
	ee	(ii) (a)Signature/left/right hand thumb impression of parent legal guardians			
Tacc		(b)Full name in capital letters(c)Relationship to the Student			
N:B-	- Signature of Applicant duly attested by Hea	d of Institution.			
	(To be filled in by the Head of	PART-B the Institution where the applicant is studying)			
(i)					
(i)	The statement made by the applicant in Par correct to the best of my knowledge and all /certificate have been checked.				
(ii)	Character, conduct and attendance of the applicant (general review)				
(iii)	Whether you recommend the applicant for of a scholarship	the award :			
(iv)					
<i>(</i>)	applicant is studying in your institution	:			
(v)	Date of commencement of the current acad session of this course.	emic .			
(vi)		: at			
(11)	course/class this year	:			
(vii)	Likely date, month and year on which the a	nnual			
	examination of the current session will be o	over			
	(including practical)	:			
(viii)	i) (a) Is the applicant exempted from	Y/ A/			
	payment of tuition fee (b) If was places indicate whether every the payment is a second to the payment in the payment of tuition fee	: Yes/No			
	(b) If yes, please indicate whether exemption is for full or half tuition				
(ix)		hostel			
()	of the institution or an approved hostel.				
	(2) If the applicant is residing in a hostel, p	lease			
	indicate, if he/she is entitled to-	:			
	(a) Free boarding	:			
	(b) Date of joining in the hostel/ approved,	hostel :			

(x) Name of the nearest branch of Nationalized Bank through which the payment of desired.					
Institute Bank Account No					
IFS Code					
Certified that this Institution is a	affiliated toUniversity	y/ Board and is			
recognized by the Government of Indi	ia/State Government of	(Registration/			
Affiliation No Year). T	he applicant is studying in	course in this			
institution and the minimum qualifica	tion required for admission to this course is pass	in the			
examination.					
I undertake that the Scholarship	amount in respect of the applicant if and when p	placed at my disposal will			
be disbursed by me for the specific pu	rposes for which it is given and the accounts wil	l be regularly rendered to			
the authority which awarded the scho	plarship. In case, the applicant leaves institution	or otherwise discontinues			
the studies or accepts any other regul	lar scholarships/ stipend the fact will be immedi	ately reported to the said			
authority and payment of scholarship	to the applicant will also be discontinued. The a	amount not disbursed and			
lying with the institution on account of	of maintenance charges, fees, etc. will also be ref	funded to the Government			
account.					
NoPlaceDate	Signature of the Head of the Institution Name in Capital letter				
		Seal of the Institution			

- N.B.- (1) Institute should attach copy of latest registration/affiliation certificate of UGC/Council/Board/University etc.
 - (2) Stamped (facsimile) signature will not be accepted.
 - (3) No application will be entertained unless it is recommended through a forwarding letter by the Head of the Institution.

PART-C

(To be filled in by Head of the Institution where the applicant is studying)

pa	Details of the non-refundable coyable by the applicant during the curren					other inciden	tal charg	ges)
an 	The applicant is required to pay on the applicant is required to pay of the applicant is required to p			to this institution	for th			
	rticulars of all non-refundable mpulsory fees payable by the	Rate		Amount actually payable by the applicant to the institution			Remark	KS
	plicant	Rs. P.		Rs. P.				
	iition	IXS.	1.	NS.	1.			
	amination							
Ga	ames							
Li	brary							
M	edical							
Т	otal		1					
	Signature of the Head of the Institution Seal							
		<u>C</u> 1		<u>K LIST</u>				
Do	ocuments to be attached:	P	lease p	out a 'ffl' in the Box a	longside			
1	Passport size photograph in the appropriate box of the application form with his/her signature thereon and the photograph must be attested by the Head of the Institution.							
2	Caste Certificate from the competent a	uthority						
3	(a) Income certificate from the concern		orized	authority/ persons.				
	(b) Salary Certificate from the employe	er if pare	ent are	employed				
4 Residential Certificate from the concerned authority.								
5 Part-'A' of the application form countersigned by the Head of the Institution.								
6	Forwarding letter by the Head of the Ir	•	•					
J	1 of warding fetter by the fread of the fi	istituti01	•					
7	Hostel certificate (in case of hosteller)							
8	Copy of mark sheet of last class passed	d.						