

**RENEWAL 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 applied for the year:
Caste:	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.Com., B.Sc., 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 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.

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

Application must be sent through the Head of the Institution.

To
The Director/District Welfare Officer.....

Through
The Principal /Registrar.....
Website-..... E-mail.....
Landline..... Mobile.....

PART-A

(To be filled in by the applicant in neat and clear handwriting)

1. Name in full (in capital letters) : Shri/Kumari/Smt
Landline No.-..... Mobile No.....
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 attached)
8. Whether the applicant is in employment : Yes/ No
If yes, whether: -
(a) Part-time/ Full time : Monthly emolument

9. Whether received scholarship under the scheme or any other scheme in the previous year?
If yes, indicate-
- (i) Name of the scholarship scheme :
 - (ii) Course of study for which scholarship was given :
 - (iii) Name of the institution in which the scholarship was awarded. :
10. (a) Whether the applicant has applied for or received any other scholarship/stipend or remuneration in this current session.
- (b) Whether the applicant has applied for Post-Matric Scholarship as a student of any other institution during the session under this scheme
11. Particulars of examination taken commencing with the Matriculation or equivalent examination (Please attach attested copies of certificates, mark sheets. Any break in educational career should be indicated in remarks column)

Name of Examination	Institution and University/ Board	Year in which taken	Whether passed or not, if passed state division and percentage of marks	Remarks

12. Post matric scholarship applied for the year:-
13. (i) Course of study for which the scholarship is now desired :
- (ii) Duration of course :
- (iii) Date of admission :
- (iv) Tentative Month/Year/ of final examination :
14. Whether residing in the hostel of the institution. : Yes/No
- (i) If yes, give its (Hostel) Name & Address :
 - (ii) Date of joining & certificate of the warden with Seal and signature must be attached

15. Name of the nearest branch of **Nationalized Bank** through which the payment of Scholarship desired.....
Student's Bank Account No......
 Branch Name & Code.....
 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.....
 (ii) (a)Signature/left/right hand thumb impression of parents
 legal guardians
 Date.....
 Place.....
 (b)Full name in capital letters.....
 (c) Relationship to student.....

N:B- Signature of Applicant duly attested by Head of Institution.

PART-B

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

- (i) The statement made by the applicant in Part-A are correct to the best of my knowledge and all documents/ certificate have been checked. :
- (ii) Character, conduct and attendance of the applicant (general review) :
- (iii) Whether you recommend the applicant for the award of a scholarship :
- (iv) Duration of the course in which the applicant is studying in your institution :
- (v) Date of commencement of the current academic session of this course. :
- (vi) Exact date on which the applicant joined that course/class this year :
- (vii) Likely date, month and year on which the annual examination of the current session will be over (including practical) :
- (viii) (a) Is the applicant exempted from payment of tuition fee : Yes/No
 (b) If yes, please indicate whether exemption is for full or half tuition :
- (ix) (1) whether the applicant is residing in the hostel of the institution or an approved hostel. : Yes/No
 (2) If the applicant is residing in a hostel, please 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 Scholarship desired.....

Institute Bank Account No.....

Branch name & Code.....

.....IFS Code.....

Certified that this Institution is affiliated toUniversity/ Board and is recognized by the Government of India/State Government of(Registration/Affiliation No..... Year.....)

The applicant is studying incourse in this institution and the minimum qualification required for admission to this course is passed in the..... examination.

I undertake that the Scholarship amount in respect of the applicant if and when placed at my disposal will be disbursed by me for the specific purposes for which it is given and the accounts will be regularly rendered to the authority which awarded the scholarship. In case, the applicant leaves institution or otherwise discontinues the studies or accepts any other regular scholarships/ stipend the fact will be immediately reported to the said authority and payment of scholarship to the applicant will also be discontinued. The amount not disbursed and lying with the institution on account of maintenance charges, fees, etc. will also be refunded to the Government account.

No.....

Place.....

Date.....

Signature of the Head of the Institution

Name in Capital letter.....

Address.....

Seal of the Institution

- N.B.-**
- (1) Institute should attach copy of latest registration/affiliation certificate of UGC/Council/Board/University
 - (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)

FORM OF CERTIFICATE TO BE ISSUED BY THE HEAD OF INSTITUTION IN CASE OF RENEWAL OF POST-MATRIC SCHOLARSHIP

1. Certificate for Renewal of Scholarship for the year.....
2. Certified that Mr./Miss..... religion belonging towas in receipt of Post-Matric Scholarship while pursuing the course for last (.....) years as detailed below:
Duration of the course

3. Date of promotion in the next classification.....

Year	Year of study	Whether applied for scholarship	If so, Amount of scholarship in receipt and upto the month of	Outcome of the Exam. He/she has appeared.	Remarks/ Reasons
1	2	3	4	5	6
1 st Year	20 -20				
2 nd Year	20 -20				
3 rd Year	20 -20				
4 th Year	20 -20				

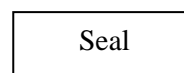
After successful completion of the courses of study of 1st/2nd/3rd/4th year during the year he/she has been promoted to the next higher class in the year Hence, he/she is entitled to get Post-Matric Scholarship subject to his/her continuance in the next class and courses of study in the following year(s).

The applicant is required to pay compulsory fees (excluding hostel rent and other incidental charges) amounting to Rs. (in words) to this institution for the current year from to As per details given below:

Particulars of all non-refundable compulsory fees payable by the applicant	Rate		Amount actually payable by the applicant to the institution		Remarks
	Rs.	P.	Rs.	P.	
Tuition					
Examination					
Games					
Library					
Medical					
Total					

Note: Any other compulsory non-refundable fees paid by the applicant to the institution be indicated here. No fee should be given without details.

Signature of the Head of the Institution



CHECK LIST

Documents to be attached :

Please put a 'ffl' in the Box alongside

- 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 authority
- 3 (a) Income certificate from the concerned authorized authority/ persons.
(b) Salary Certificate from the employer if parent 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 Institution

- 7 Hostel certificate (in case of hosteller).
- 8 Copy of mark sheet of last class passed.