

REVISED FORM

APPLICATION FOR AWARD OF SCHOLARSHIP UNDER THE SCHEME NOTIFIED VIDE DEPARTMENT OF PERSONNEL AND TRAINING'S O.M NO. 20/1/2011-Dir.(C), DATED 2nd SEPTEMBER, 2011.

A) Details of the Applicant (Canteen Employee)

Name _____ Designation _____

Full Office Address : _____ Tel. No. _____

Residential Address : _____

Whether SC/ST (If yes, attach certificate) _____

Name of Bank _____ Name of Branch _____ Bank Account No. _____

Bank IFSC Code _____ Aadhar No. (If any) _____

B) Details of the Son/Daughter of Canteen Employee for whom Scholarship is sought :

Name _____ Son/ Daughter _____ Date of Birth _____

Whether differently-abled (If yes, attach Medical Certificate stating nature and percentage of disability) _____

Name and Duration of the Present Course _____

Stream of study (Science/Non-Science) _____

Name of School/College/Institute alongwith Board/University by which recognized/affiliated _____

Current Standard in School/Year in College _____

Is there any break between previous stage of study & joining the current educational course? (If yes, state reason(s)) _____

C) Details of marks (Subject wise) obtained in the previous year of Class/Course (self-attested copies of mark sheet should be enclosed):

Name of the Examination	Year of Passing	Maximum Marks	Marks Obtained	Percentage of Marks

D) Details of other scholarship(s) already received or applied by the child _____**E) Please attach**

- (i) Aadhaar enrolment ID, if he has enrolled or A copy of request made for Aadhaar enrolment; and
(ii) Copy of Bank Passbook with Photo or Voter's ID Card or PAN Card or Passport or Driving Licence or Ration Card or Photo ID Card issued by the Government.

DECLARATION

I _____ declare that the particulars as given in the above are true and complete to the best of my knowledge and belief.

Date : _____

Place : _____

Signature of the Applicant
(Canteen Employee)

Certified that the entries under Col. A are correct as per Office Records.

Signature of Head of the Office
(With Seal)