APPLICATION FORM

LATE, INCOMPLETE OR DEFECTIVE APPLICATION WILL BE SUMMARILY REJECTED

N.B.- This application should be submitted to the Project Director I.T.D.P. (Local) through the Head of the Institution

DIRECTOR, WELFARE OF SCHEDULED CASTES

(IN CASE OF STUDENTS STUDYING OUTSIDE THE STATE)

Applicant must Affix a passport size photograph with his/her signature thereon

PART A

(TO BE FILLED IN BY THE APPLICANT IN NEAT AND LEGIBLE HANDWRITING)

1.	(a) Name of the applicant in full
	(in block capital letters)
	(b) Bank A/C No: (c) IFSC No.:
	(d) Name of Bank:
2.	(a) Name of the Institution where the student is studying during 20
	(b) ClassRoll No.:
3.	Date of Birth-
	(attested copy of the birth certificate to be enclosed)
4.	Whether a SC disabled student Yes/No
	(if yes, enclose a certificate from a competent authority)
5.	Whether you are pursuing a correspondence course Yes/No
6.	Father's / Husband's name in full
	(In case of married girl student, husband's particulars are Invariably required)
	(i) Occupation:
7.	(a) Permanent address; Village/Town:
	P.O:P.S
	Mouza:
	Dist.:
	Municipality Ward No.:
	(b)
	P.O:P.S.:
	Mouza:Municiaplity ward No:
8.	Applicant 's occupation, if any
9.	Who supports you in studies, i.e. Father/Mother/Guardian/Husband
	(i) Name(ii) Occupation
	(iii) Full address

1		`		
()	1	
Serial	Name of the	Class in which	Name of the Institution	Whether in receipt of
No	Student	reading	where prosecuting	Scholarship Particulars
			studies	with Allotted Number and
				whether fresh or renewal
1	2	3	4	5
		1	1	l

10. Name of your own brother/sister receiving Post Matric Scholarship under this Scheme during

11. Year of the last University/Board/Annual Examination Passed.....

(a) Activities during the gap period, if any.....

(A prescribed declaration form, which is available with the head of the Institutio, is to be filled up and signed by both student and parent/guardians and also to be countersigned by the head of the Institution where the student is prosecuting his/her studies is to be furnished without which the application will be rejected.)

(b) Whether you studied in any institution after passing the last annual/final examination, and if so,
name of the institution
(c) Were you awarded scholarship for the course which you could not compete?

Examination Taken	Date in which Examination Taken	Year in which Whether examination passed	Whether university Board or Class examination	Percentage marks secured in the examination	Class or division obtained in the examination	Name of the Institution from which passed
1	2	3	4	5	6	7

12. Particulars of the examination from Matriculation or onward

- 1. H.S.L Certificate
- 2. Higher Secondary School Leaving Certificate
- Indian School Certificate Examination
- 4. B.A/B.Sc./B.Com
- 5. 1st M.B.B.S./ Engg.I/II
- 6. M.B.B.S
- 7. M.A./M.Sc./M.Com.Prevo
- 8. M.A./M.Sc./M.Com.etc.
- 9. B.T./L.L.B. Prel/Int.
- 10. Any other Post-Matric Course with name
- 11. Correspondence Course (Name of the Course)

- 14. Documents to be attached-
 - (i) Part "B" of the application form duly completed and signed by the head of Institution
 - (ii) Caste and Citizenship Certificate (Annexure-I)

(iii) Income Certificate (Annexure-III)

(iv) Income declarations(Annexure-IV)

I/We hereby declare that I/We have read the regulations of the scheme and agreed to abide by the terms and conditions of the award. I/We certify that the statements made in application are correct and if any of them is found to be false and incorrect by the authority, whose 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.

N.B. If father/husband(in case of married unemployed woman), is alive signature of only father/husband (as the case may be) is acceptable

Signature of the applicant (a) Signature/left/Right hand thumb impression of the parents/guardian

Place:

(b) Ful name in capital letters

Date:

(c) Relationship with the student

ANNEXURE I

CASTE CERTIFICATE

Note : (i) This certificate is to be signed by the DEPUTY COMMISSIONER OF THE DISTRICT OR SUB DIVISIONAL OFFICER (CIVIL) OF THE SUBDIVISION (Where the parents/Guardian the candidate is permanently residing) or Commissioner for Scheduled Castes/Tribes

- (ii) This is a very important document as the scholarship is awarded mainly on the basis of this certificate. The issuing authority is, therefore, advised to issue thiscertificate, with due caution.
- (iii) The particulars must be filled in by the issuing authority in his own handwriting.

I certify that to the best of my knowledge Shri/Kumari/Shrimati (Name of the student).

Son/daughter/wife of Shri (Name of Father/Husband)					
permanent resident of village					
P.O.:	Mouza		P.S		
District		State			
Shri/Kumari/Shrimati					
Belongs to the Caste			Sub-Caste		
and his/her religion is					

Place	* Signature of the issuing authority
- .	
Date	Full name in capital letters
**Seal	Designation
	J. J
	Address in full
*Stamped signature will not be accepted.	

**Certificate not bearing the seal of issuing authority will not be accepted

ANNEXURE II

INCOME CERTIFICATE

This certificate in respect of the parent/guardian is to be issued by-

- (1) Circle Officer (Revenue)/BDO/Mouzadar in case of cultivator
- (2) Employer in case of Govt/Quasi Govt.Employees/Employees working in private sector
- (3) Income tax officer in case of Businessmen

profession is annual income from all sources (including student's o 31 st March 20was Rs	wn earning, if any) in the preceding year ending
Rupees) Only.
	ignoture of the Income Tay Officer/
	ignature of the Income Tax Officer/
	C.O.IBD.O./Mouzadar/
	Employer/Proprietor
	Full Name
SEAL	
	Designation
	Address
	Countersigned by Signature of D.C.IS.D.O
	Full Name
Place	Designation
Date	Seal

**Stamped signature will not be accepted

ANNEXURE III

FORM OF DECLARATION OF INCOME FORMA

(TO BE GIVEN BY PARENTS/GUARDIAN.WHEN PARENTS ARE ALIVE, PARENTS DECLARATION IS REQUIRED.FOR MARRIED FEMALE CANDIDATE HUSBAND'S DECLARATION IS REQUIRED)

Whereas my son/daughter/dependent/Shri/Shrimati (in case of married female & candidate		
Miss	Student of	
	College, has applied for grant of a scholarship	

I,	Shri	son	of S	Shri	
	Adc	lress	Villag	e	
P.O	District	State.		declare	that

[6]

my total annual income from an sources in the preceding year ending 31st March.

I also affirm that particulars of property held by me are (as per details furnished in the Schedule hereunder) and that I have correctly indicated the amount of various taxes, cesses and land revenues paid by me. I make myself *personally* responsible for the *accuracy* of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to be false. I shall refund to the president of India, the whole amount of the scholarship paid to the (name of the student)......and the Government's decision or whether the declaration or particulars is taken shall be final and binding on me.

I further declare that I am a permanent resident of the state of Assam......and belonging to (Sub-Caste)......carrying my professions as.....

Place..... Date.....

.....

Signature Relationship to the Student

SCHEDULE

(As owner of tenant)

I. EXTENT OF LAND HELD

	(i) Areas	
	(ii) Village	Mouza
	(iii) Survey No/Patta No	
	(iv) Land revenue assessed.	
II. PRO	OPERTY HELD	(House, Shops, House-sites, etc)
(i)	Brief description of the prope	rty
(ii)	Location: Street	Vill/Town
(iii)	Rent derived, if any	
(iv)	House tax paid	
(v)	Nature of Business	
(vi)	Sales-tax/income-taxes paid.	
(vii)T	rade Permit/Licence No	
III. SA	LARIES DRAWN	
(i)	Name of the Employer	
(ii)	Office/Unit in which he/she (i	s) working with designation

Monthly emoluments (including all deductions):

(a) Basic pay	Rs
(b) Other Allowances	Rs

OTHERS

(i)	Income from part-time occupation	Rs
(ii)	Amount drawn as wages	Rs
(iii)	Any other income	Rs
		Total Rs

N.B. Father/Husband (in case of married) unemployed woman if alive, signature of father/husband (as the case may be is acceptable)

Signature of left/right thumb impression of
parent/guardian/husband as the case may be

Place	Name
Date	Address

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. Caste
	certificate has been checked.
(ii)	Character, conduct and attendance of
	the applicant (general review)
(iii)	Whether regular pass or supplementary
	or provisionally promoted
(iv)	If provisionally promoted, the name of
	the back subject to be cleared
(v)	Whether you recommend the applicant
	for the award of scholarship
(vi)	Duration of the course in which the applicant is studying in your Institution
(vii)	Whether Degree/Diploma, Certificate/Trade professional course
(viii)	Date of commencement of the current
	Academic Session of the course
(ix)	Exact date on which the applicant joined
	That course/class this year
(x)	Likely date, month and year on which the annual examination the current session will be over
	(including practical subjects)

- (xi) (a) Is the applicant exempted from payment of tuition fees? Yes or No......(b) If yes, please, indicate whether exemption is for half or full tution fees.
- (xii) If the applicant is residing in an approved hostel, Please indicate if he/she is entitled to free board/free lodging
- (xiii) Exact date of admission in the hostel
- (xiv) The name of the nearest branch of State Bank of India in respect of outside the State and the name of the Bank Account No. in respect of inside the State, through which the payment of scholarship is desired should be stated here
- (xv) The designation and full address of the Head of the Institution to whom the scholarship amount in respect of the student may be sent
- (xvi) The student is required to pay the following fee during which are not re-imbursed by State Government or from any other sources-
- N.B: The head of the Institutions is to see that no other fee charged excepting thefee as listed below:-

	Cours Amount p for the	bayable	Cours Amo for the	unt
(a) Enrolment or Registration fee	Rs.	P.	Rs.	P.
(b) (i) Tuition fee-				
(ii) Science or Laboratory fee (if any)				
non-refundable portion.				
(c) Game fee				
(d) Union fee				
(e) Library fee				
(f) Common Room fee				
(g) Magazine fee				
(h) Medical examination fee charged by the				
institution				
(i) Examination fee charged by the Institution/				
University Total fee payable during				

For use of the office of the	Project Director. I.T.D.P.
Assam	

Amount passed for payment Rs
Checked by

Signature of the Head of the Institution

(1) Project Director I.T.D.P

.....Assam

(2) Director, Welfare of Schedule Caste, Assam

Certified that the Institution is affiliated to the
University / Board and is recognized by the Government of India / State Government of
in the year of
minimum qualification required for admission to the 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 purpose for which it is give and the accounts will be r egularly rendered to the authorities which awarded the scholarship. In case the applicant leaves the Institution or otherwise discontinue the studies or accepts any other regular scholarship/stipends the fact will be immediately reported to the said authority and payment of scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charge, fees, etc, will also be refunded in the Government account.

*signature of the Head.....of the Institution

No	
Place	
Date	

Name in capital letters
Designation
Address

SEAL OF THE INSTITUTION

*Stamped signature will not be accepted