		APPLICATION FORM	
P	FOR POST-MATRIC SCHOOL URSUING POST MATRIC COUR	ARSHIP TO THE SCHEDULED CASTE	STUDENTS OF ASSA
	LATE, INCOMPLETE O	R DEFECTIVE APPLICATION WILL BE REJECTED	SUMMARILY
N.	. B This application should be I.T.D.P. (Local) through the DIRECTOR, WELFARE OF		Applicant must affix a passport size
	(IN CASE OF STUDENTS S	TUDYING OUTSIDE THE STATE)	photograph with his/her signature thereon.
	(TO BE FILLED IN	PART A BY THE APPLICANT IN NEAT AND LE HANDWRITING)	EGIBLE
1.			
	(in block capital letters).		
	(b) Bank A/C No	(c) Name of Bank	
	(d) 1FSC No	(e) Branch N	
2.	(a) Name of the Institution whe	re the student is studying during 20	• • • • • • • • • • • • • • • • • • • •
	(b) Class	Roll No.	
3.	Date of birth-		
	(attested copy of the birth certif	icate to be enclosed)	
4.	Father's/Husband's name in ful		
		husband's particulars are invariably rec	
	(I) Occupation		<u>.</u>
5.	(a) Permanent address:	Village/Town	
		P.O P.S	
		Mouza	
		Dist	
	(b)	Municipality Ward No.	
	(b)	50	
		P.S.	

Who supports you in studies, i.e. Father/Mother/Guardian/Husband

6.

7.

8. Name of your own brother/Sister receiving post Matric Scholarship under this Scheme during (

Serial No.	Name of the Student	Class in which reading	The state of the s	of the Institution ere prosecuting studies	Whether in receipt of Scholarship Particulars with allotted Number and whether fresh or renewal	
1	2	3	ni orit	4	111800 5	
Lis TO		CONTRACT	roc	OR CHAN	DIRECTOR WELF	
	AND LEGIBLE	TABIN METMACO TO A CO	AWC III			
		s ic half			(a) Name of the application block capital series (b). Bank ACN (c).	
	- emol de	ces Report Stadying during	eliin niss		(d) 1戸SCNo	
		168			28615 (d)	
					Cathala (cop) of the b	
					en albhadautha tertia T	

9.	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 Institution, 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
3	if so, name of the institution
(c)	Were you awarded scholarship for the course which you could not complete?

- (iii) Income Certificate (Annexure-II)
- (iv) Income declarations (Annexure-III)

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	 	 	 	 	 						
Date .	 	 	 	 	 			•	 		

- (b) Full name in capital letters
- (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 of 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 this certificate with due caution.
- (iii) The particulars must be filled in by the issuing authority in his own handwriting.

I certify that to the I	pest of my knowle	edge Shri/Kumari/Shrima	ti (Name of the

student) .....

10.	Particulars of	examination from	om Matriculat	ion or onward	1		
31.1	Examination Taken	Date in which examination Taklen	Year in which examination passed	Whether University Board or Class examination	Percentage of marks secured in the examination	ofClass or division obtained in the examination	Name of the Institution from which passed
-	(1)	(2)	(3)	(4)	(5)	(6)	(7)
		Mayor, our renewy Said authority o			2 2 2 2 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2	erk do pobe	
1.	H.S.L.						
	Certificate						
_							
2.	Higher						
	Secondary So						
	Leaving Certif	icate. Hetterniempie					
3.							
	Certificate						
	Examination						
4.	B.A./B.Sc./B. (	Com.					
E	4-4440000						
5.	1st M.B.B.S./ [						
6.	M.B.B.S.						
	141.0.0.0.						
7.	M.A./M.Sc. M.(	Com Prev.					
8.	M.A./M.Sc./ M.	Com. etc.					
9.	B.T./LL.B. Prel	/Int.					
10.	Any other						
	Post-Matric Course with na						
	Course with na	me					
11.	Whether you a	re/were in recei	pt of scholars	hip under any	other sche	me in this/the	proceding
	year (s) : Yes o	r No			other sone	THE IT THIS/THE	preceding
	If Yes, please f			Ono (anales	one or ex	andidate is a	edi
(i)	Name of the sch	olarship schem	e				
(ii)	Course of stud	ly with the na	me of the in	stitutions for	r which sch	olarshin wa	s granted
						ioiaisiiip wa	s granted
(iii)	Year and class of					ian atsiuoins	q ant (m)-
(iv)	Sanctioning No.						
	AllotedNo						
12. V	hether residing ir					••••••	
	es, name of the h						
	ocuments to be a				•••••		
	rt "B" of application		mpleted and s	signed by the	head of Inst	itution	
	aste and Citizensh					Tallott.	

Son/daughter/wife of Shri (name of fa	ather/husband)
	permanent resident of village
Wiou	Za
	····· State
The state of the s	(name of the at 1 at
- statige to the daste	····· Sub-Caste
and his/her religion is	
Place	* Signature of the issuing authority
Date	Full name in capital letters
	Designation
**Seal	Address in full
**Certificate not bearing the seal of iss	ANNEXURE II
IN	COME CERTIFICATE
This certificate in respect of the parent	guardian is to be issued by-
(1) Circle Officer (Revenue)/BDO/N	Mouzadar in case of cultivator
(2) Employer in case of Govt./Qua	si Govt. Employees/Employees working in private sector
(3) Income tax officer in case of Bu	sinessmen
Certified to the vest o	f my knowledge that Sri/Srimati
	father/mother/guardian/
husband of Shri/Shrimati	(name of the
student) is a permanent resident of vil	lage
P.O	District
State Ass	sam. His/her

profession is	a state state	and his/her total annual
ncome from all sources (inclu	ding student's own earning, if a	any) in the preceding year ending
31st March	was Rs	) Only.
Rupees		#Emintelinemodinal
	Sinb-Charle	belonge to the Caste
	**Signature	of the Income Tax
		/BD.O./Mouzadar/
	Employer/Pr	oprietor
SEAL		
O La Ma	Designation	
	Address	Data
	Countersigned by-	
	Signature of D.C./S.I	0.0
Place	Designation	Starriged signature will not be a con-
Date	Seal	"Certificate not bearing a election".
Date		
**	*Stamped signature will not be acc	cepted.
	ANNEXURE III	
FORM	M OF DECLARATION OF	F INCOME
	FORM A	
(TO BE GIVEN BY PARI DECLARATION IS REQ	ENTS/GUARDIAN. WHEN PAR UIRED. FOR MARRIED FEMA DECLARATION IS REQUIR	RENTS ARE ALIVE, PARENTS ALE CANDIDATE HUSBAND'S RED)
Whereas my son/daug	ghter/dependent/Shri/Shrimati (in c	case of married female candidate Miss
ingipiec. Arenicminutist	Stud	dent ofd.f. a shelership
12	College	e, has applied for grant of a scholarship
		student) is a permanent resident ca
I, Shri	······································	Son of Shri
	Addres	s Village
P.O	District State	declare that

here	eunder)	and that I have correctly in	rty held by me are (as per details furnished in the Schedule dicated the amount of various taxes, cesses and land revenues responsible for the accuracy of the facts and figures furnished.
the	e. I shall student)	refund to the President of	vent of the particulars given in this declaration being found to be India, the whole amount of the scholarship paid to the (name of and the Government's decision or whether the declaration d binding on me.
	belongir		nanent resident of the state of carrying my professions
Plac	ce		Cimathus
Date	e		Signature . Relationship to the Student
		•	SCHEDULE (as owner of tenant)
		T VIV	(as owner or tenant)
I. EX	(i)	OF LAND HELD  Areas	
	(ii)	Village	
	(iii)	Survey No/Patta No	
	(iv)	Land revenue assessed	
11	PRO	PERTY HELD	(House, Shops, House-sites, etc.)
	(i)	Brief description of the	property
	(ii)	Location : Street	Vill/Town
	(iii)	Rent derived, if any	
	(iv)	House tax paid	
	(v)	Nature of Business	<u> </u>

## III. SALARIES DRAWN

(vi) (vii)

- Name of the Employer .....
- Office/Unit in which he/she (is) working with designation ..... (ii)Monthly emoluments (including all deductions):

Sales-tax/income-taxes paid .....

Trade Permit/Licence No .....

(a) Basic Pay	Rs
(b) Other Allowances	Rs
OTHERS	I also affirm that particulars are restored the summary and that have go
(i) Income from part-time occupation	
(ii) Amount drawn as wages	Rs
(iii) Any other income	Rs.
	Total Rs.
· smith of	or particulars is taken shall be just and are
N.B. Father/Husband (in case of married)	
unemployed woman if alive, signature	Signature or left/right thumb
of father/husband (as the case may be	impression of parent/guardian/
is acceptable)	husband as the case may be
Place	Name
Date	Address
PART -	В
TO BE FILLED IN BY THE HEAD OF THE INS	and the second s
31001111	essiA (i)
(i) The statement made by the applicant in Part (A) are	
(ii) Character, conduct and attendance of	
the applicant (general review)	
or provisionally promoted	
(iv) If provisionally promoted, the name of	
the back subject to be cleared	
( ) 100 11	
for the award of scholarship	
(vi) Duration of the course in which the applicant is st	tudving in your Institution.
(vii) Whether Degree/Diploma, Certificate/Trade profe	essional course
(viii) Date of commencement of the current	
Academic Session of the course	II. SALARIES DRAWN
(ix) Exact date on which the applicant joined That course/class this year	
(x) Likely date, month and year on which the annual e (including practical subjects)	examination in the current session will be over

(XI)	(a)	is the applicant exempted from pay	ment of tur	tion fees? Ye	s or No
	(b)	If yes, Please indicate whether exer	mption is fo	or half or full	tution fees.
(xii)	If the	applicant is residing in an approved ho	ostel, Plea	se indicate if	he/she is entitled t
(xiii)		t date of admission in the hostel			
(xiv)	The i	name of the nearest branch of State B he name of the Bank and Account No. i ayment of scholarship is desired shou	ank of Indi	ia in respect	of outside the Stat
(XV)	The d	designation and full address of the Hea ant in respect of the student may be se	d of the Ins	stitution to wh	nom the scholarshi
(xvi)	The s	student is required to pay the following Government or from any other source	fee during	g which are n	ot re-imbursd by
N.B	The I	lead of the Institutions is to see	C	ourse	Course
	that r	no other fee charged excepting the		ount payable or the year	Amount
	fee a	s listed below :-			for the year
(a)	Enrol	ment or Registration fee	Rs.	Р	Rs. P
(b)	(i)	Tution fee-			
	(ii)	Science or Laboratory fee (if any) non-refundable portion.			
(c)	Game	e fee			
(d)	Unior	n fee			
(e)	Librai	ry fee			
(f)	Comr	mon Room fee.			
(g)	Maga	zine fee			
(h)	Medic institu	cal examination fee charged by the ution.			
(i)		rination fee charged by the Institution/			
For use of the	ctor. I.T.	D.P., ·	Maintena		to
			. (1		Director I.T.D.P.
		payment Rs.	(2	2) Director of S.C.	r, Welfare Assam

minimum qualification requir	red for admission to the course is passed i	n the	
	Examination	n. arrien echons	
oh uwa eu au au wa a			
will be disbursed by me for the rendered to the authorities we or otherwise discontinue the immediately reported to the discontinued. The undisbursed	ship amount in respect of the applicant if ar he specific purpose for which it is given and which awarded the scholarship. In case the estudies or accepts any other regular schol esaid authority and payment of scholarshipsed amount lying with the Institution on acc	d the accounts will be applicant leaves the arship/stipends the period to the applicant were secured.	e regularly institution fact will be vill also be
fees, etc, will also be refund	led in the Government account.		
fees, etc, will also be refund			
fees, etc, will also be refund			institution
fees, etc, will also be refund		of the	
	*Signature of the Head	of the	
No	*Signature of the Head Name in capital letters	of the	(D)
No	*Signature of the Head Name in capital letters Designation	of the	(D)
No	*Signature of the Head Name in capital letters Designation	of the	(D)
No	*Signature of the Head  Name in capital letters  Designation  Address	of the	(C)
No Place Date	*Signature of the Head  Name in capital letters  Designation  Address	of the seasons of the	(c) (c)