

**APPLICATION FOR GRANT OF POST-MATRIC SCHOLARSHIP (FRESH)
FOR THE YEAR 2013-14**

The Director
Social Welfare Department,
Jammu. (For students studying Outside the State)

DSWO/ CDPO (For students studying with in
The Jammu Division)

Find enclosed application form of Mr./Miss

S/o / D/o Sh.

_____ belonging to Schedule Caste/ Other Backward Classes/ Physically handicapped duly completed and thus recommended for sanction/ grant of Post-Matric Scholarship.

Recent Pass Port Size Photograph (Attested By Concerned Head of the Institute)
--

Sig. & Seal of the Head of

Institution.

CATEGORY (PLEASE TICK)

SC	OBC	P/C
----	-----	-----

PART- A (To be filled in by the Student)

1. **Name in full**

(in capital letters)

2. Name of the father/guardian

3. Occupation of the father/ guardian

4. Permanent Address

(i) Village/House

No/Mohalla/Street

--

(ii) Tehsil

--

(iii) District

--

(iv) Assembly Constituency

--

(v) Telephone / Contact No.

--

5. Details of bank account of student :

(i) Name of the payee (as in the bank accounts)

(ii) Name of the Bank

(iii) Branch (full address) _____

State _____ District _____ Pin _____

- (iv) Type of bank Account _____ Saving/Current
6. Monthly Income of Father/Guardian from all sources with full details

7. (i) Name of the Institution _____
(ii) Class _____
(iii) Date of original admission _____
(iv) Year in which studying at present class _____
(v) Duration of course _____
(vi) Duration of admission in present class _____
8. State whether staying in the approved hostel _____
9. Date of joining the hostel (attach certificate from the warden & discharge certificate of warden in respect of those students who have completed the course).
10. I have read the instructions given in the form & submit that the statements made above are correct. If any portion thereof is found incorrect, the decision of authority shall be final and binding upon me.

Signature of the candidate

B. To be filled in by the Head of Institution

1. Whether the statements made by the student in Part "A" are correct according to the record available in the institution _____
2. Character/Conduct of the student _____
3. Whether you recommended for the scholarship _____
4. Likely date, month & year (in which annual exam, including practical in the current Session will be over) _____
5. Actual date of discharge _____
6. In case the student failed or otherwise detained/Misconduct please state the reason

7. Please state the non-refundable/ compulsory fee paid by the student, with details in the table given below _____

PARTICULARS:

1. College Fee _____
2. Examination Fee _____
3. Tuition Fee _____
4. Games Fee _____
5. Library Fee _____

6. Medical Fee _____

7. Any other non-refundable fee (attach detail) _____

It is certified that this institute has not forwarded / recommended any other form for grant of scholarship and also the student is not in receipt of any other scholarship. Further all his documents are Checked/Verified and Case is completed in all respects and recommended for grants of Post-Matric Scholarship under _____ Category.

	Name:
Place	Signature & Seal of
Dated	Head of Institution
	Contact No

PLEASE ATTACH PHOTO COPIES OF FOLLOWING CERTIFICATES DULY ATTESTED BY THE GOVT. GAZECTTED OFFICER

1. Permanent Residence Certificate.
2. Category Certificate (SC/ OBC) of concerned student issued from competent authority.
3. Disability Certificate, indicating 40% and above disability in case of physically Challenged Person (PCP)
4. Original Income Certificate of Parents/ Guardian duly issued by Revenue Officer not below the rank of Tehsildar concerned with his Name /seal ,No and date in respect of students whose parents/ guardian are non- Government employees.

In case of Govt. Employees / Pensioners, Salary Certificate/ Pension Certificate issued by the concerned Drawing & Disbursing Officer / Bank is required alongwith affidavit indicating that income from all sources does not exceed Rs. 2.50 lac per annum in respect of students belonging to SC and Rs. 1.00 lacs per annum for OBC Category and Rs. 44,500/Per annum in case of students belonging to Physically challenged category.

5. Fee receipt issued by the concerned Institution in original.
6. Copy of fee structure duly approved by Centre/ State Government in case of Private Institutions.
7. Proof of recognition/affiliation from Centre/ State Govt. in case of private institutions to be attached.

Specimen of Affidavit to be submitted by the Student

I _____ S/o _____

R/o _____ District _____

Do hereby solemnly declare on oath that:-

- I am not in receipt of any other scholarship from any other institution/Department for the year _____
- I am not pursuing any other course from any other Institution for which I have applied for another scholarship.
- I have PAID/NOT PAID an amount of Rs. _____ to _____ Institution for _____ course.
- All details mentioned in the form and documents attached are true and correct and nothing has been concealed therein.
- I under take that if I am found guilty for providing any wrong information or misleading the Government, the Government is liable to take any necessary action against me under rules, including recovery of the scholarship amount/ being black listed/debarred from any scholarship in the future.

Deponent