Application Form

PRESIDENT SCHOLARSHIP

Academic Year 2016-17

INSTRUCTIONS

- Refer the Announcement Notice to check the category of Scholarship and to assess your eligibility
 Bank Account must be in the name of the student applying for scholarship
 Applications to be submitted to Hansa Gohel, Admin Office between 3 pm to 5 pm

Last date for submission: 30 September 2016, 5 p.m.

PERSONAL DETAILS															
Name of Applicant / Student															
Faculty					P	rogra	n								
Code No					E	mail I	D								
Presently registered semester					N	lobile	No								
GPA of last qualifying exam						dmiss		erit R	ank						
Of 7t of last qualifying sxam															
BANK DETAILS (Account mu	ıst be	in th	e nam	ne of t	the st	udent	appl	ying f	for gr	ant)					
Name of Account Holder															
Name of Bank & Branch Address															
Account Type															
IFSC / NEFT Code															
Account Number															
											<u> </u>		<u> </u>		
COVERNMENT / OTHER SCH	IOI AF	PCHII	DS (A	vaile	d in 2	016-1	7)								
GOVERNMENT / OTHER SCHOLARSHIPS (Availed in 2016-17) Name of Scholarship / TFW / GOG / GOI / NGO 1. Amount availed in 2016-17							•								
2.															
3.															
DECLARATION		ـ اـ ـ ـ ـ ـ ـ							-4!						
 I am submitting herewith the required documents in support of my application a) Result – Grade Report of Previous Academic Record / Mark sheet / Transcript b) Photocopy of CEPT Fee Receipts (student copy) c) Copy of Bank passbook or blank crossed cheque of the bank (Account must be in the 															
name of the student applying for grant)															
2. I certify that the statements furnished herein are true to the best of my knowledge and grant my permission for this information to be shared with scholarship selection committee.															
Signature of Applicant				Date	Date of Application										

RECOMMENDATION OF THE COMMITTEE						
I hereby approve of the above application and recommend this nomination for the above financial aid.						
Signature of Registrar / Academic Director	Date of Approval					
FOR OFFICE USE ONLY						
Received by	Date of Receipt					