OVERN		KA	
(*(??	DIRECTORATE O) F	MINORITIES
tari		Amb	edkar Veedhi, Bengaluru - 560 001
I	Website: www.gokdom.kar.nic.in		
No.	: DOM/Madrasa/CR-01/2017-18		Date: 18.05.2017
For	MADARASA NOTIFI the year 2017-18 Proposals are being		
in	the State to avail Financial Assistan	ce l	ander Modernisation of Madrasas
Sc	heme to provide Modern, Formal ar	nd C	omputer Education.
Inte	erested Madrasas can avail the assis	tanc	e by submitting the proposals to the
	ncerned District Officer, Minority Welfa drasas who have already submitted		
	ar 2016-17 need not submit proposa		
	r applications and more information re		
	Minorities' official Website: www.goko		
Las	st date for submission of proposals is		
	MADARASA SCHOL		
Foi	r the year 2017-18 under Modernisation to called from the Students of Madras	on of	Madrasas Scheme, the Applications
	imbursement (Fresh & Renewal).	503	
	this Scheme the students must down		
of	Minorities' website and submit the sar the chedk list to their concerned Dist	ne a	long with the required documents as
	r applications and more information re		
	Minorities' Website: www.gokdom.ka		
Las	st date for submission of applications	is 3 (0.06.2017.
			Sd/- AKRAM PASHA, K.A.S.
		-	rectorate of Minorities, Bengaluru
1	Details of District O District Officer, Minority Welfare Department,		District Officer, Backward Classes & Minority
	1st Floor, Podium Block, V.V.Tower,		Welfare Department, Devaraja Urs Bhavana
	Dr. Ambedkar Veedhi, Bengaluru Urban - 560001.		General Thimmaiah Ground, Near Mains Compound, Kodagu-571201.
	Bangalore Urban District Phone No: 080-22866718		Kodagu District Phone No:08272-225628
	Email-id: dominority401@gmail.com		Email-id: dobcmkodagu@gmail.com
2	District Officer, Minority Welfare Department, 1st Floor, Podium Block, V.V.Tower,	17	District Officer, Minority Welfare Department, Hanumegowda Complex, Behind Narendra
	Dr. Ambedkar Veedhi,		Handmegowda Complex, Bennid Narendra Hospital, M.B Road, Kolar-563101,
	Bengaluru Rural - 560001. Bengaluru Rural District		Kolar District. Phone No: 08152-220257 Email-Id:
	Phone No: 080-22866718		domkolar@gmail.com
3	Email-id: dombengalururural@gmail.com District Officer, Minority Welfare Department,	18	District Officer, Backward Classes & Minority Welfare Department, Jilla Adalitha Bhavana
	Moulana Azad Minority District Office, Bagalkote District Administration Bhavan,		Hospete Road, Koppal-583231,
	(Beside District Training Centre),		Koppal District. Phone No: 08539-225070
	Bagalkote District-587 101. Phone No: 08354-235203		Email-Id: dobcmkoppala@gmail.com
	Email-Id: domwdbgk@gmail.com	19	District Officer, Backward Classes & Minority Welfare Department, H.K.Veeranna Gowda
4	District Officer, Minority Welfare Department, Taluk Panchayath Office, DC Office		Road, Near Old Taluk Office, Mandya-571401
	Compound, Belagavi-590001. Belgaum District Phone No: 0831-2407247		Mandya District Phone No:08232-220835
	Email-Id: dombelagavi1@gmail.com		Email-id: dobcmmandya@gmail.com
5	District Officer, Minority Welfare Department, No.52, Old Trunk Road, Opp. Ashirvada	20	District Officer, Minority Welfare Department, #1179, D 17, 8 th Cross, Devaraj Urs Road,
	School, Cantonment, Ballari-583101,		Behind Bhima & Brothers Jewellary, Mysuru-570024. Mysuru District
	Ballari District. Phone No: 08392-245755 Email-Id: dobcmbellary@gmail.com		Phone No: 0821-2422088
6	District Officer, Minority Welfare Department,	21	Email-id: gokdom.domys@gmail.com District officer, Minority Welfare Department,
	District Old Government Hospital, Manniyar Thaleem, Near Zilla Panchayat Office,	_	Next to Loksabha Members Office,
	Bidar-585401 Bidar District. Phone No: 08482-230150		Mini Vdhana Soudha, Kalburgi Main Road Kalaburagi – 585101 Kalaburagi District
	Email-Id: domwbidar1@gmail.com		Phone No:08472-247260
7	District Officer, Minority Welfare Department, Flat No.867, Vahida Risaldar Building,	22	Email-Id: domgulburga@gmail.com District Officer, Backward Classes & Minority
	Near Ganapati Temple, Keerthi Nagar,	_	Welfare Department, No.304, 2 nd floor
	Managooli Road, Vijayapura-586101, Vijayapura District		Rajathadri, Manipal DC Office Compound, B Block, Udupi-576104, Udupi District
	Phone No: 0852-276523		Phone No:0820-2574881 Email-Id:dobcmdupi@gmail.com
8	Email-Id: dominoritybijapura@gmail.com District Officer, Backward Classes & Minority	23	Email-Id:dobcmdupi@gmail.com District Officer, Backward Classes & Minority
	Welfare Department, No.131 & 132, Administration Bhavan, B. Rachaiah,		Welfare Department, Padmashree Commercial Complex, Beside Palika Hotel
	Double Road, Chamarajnagar-571313		R.C Road, Hassan-573201. Hassan District.
	Chamarajnagar District Phone No: 08226-222180		Phone No: 0817-268373 Email-id: dobcmhassan@gmail.com
	Email-Id: dobcmchamarajnagara@gmail.com	24	District Officer, Minority Welfare Department,
9	District Officer, Minority Welfare Department, 1st Floor, Jyothi Nagara, Zilla Panchayat		Nelanagowda Complex,1 st Floor, Opp LIC, P.B.Road, Haveri-581110, Haveri District
	Complex, Chickmagalur-577101, Chickmagalur District		Phone No: 08375-234505,
	Phone No:08262-220065	25	Email-id: dominoritieshaveri@gmail.com District Officer, Minority Welfare Department,
10	Email-Id: domcmangalore@gmail.com District Officer, Minority Welfare Department,	_	Harap Mohalla, Goshala Road, Tipu Sultan
10	Sriram Complex, 1st Floor, Opposite Anjaneya		Circle, Raichur-584101, Raichur District. Phone No: 0853-2226555
	Temple, Chitradurga-577501. Chitradurga District		Email-id: dominorityraichur@gmail.com
	Phone No:08194-235034	26	District Officer, Backward Classes & Minority Welfare Department, 2 nd Floor, Zilla Panchyat
11	Email-Id: domcta123@gmail.com District Officer, Backward Classes & Minority		Bhavan, B.M Road, Ramanagar-562159.
	Welfare Department, #B 4, Second Floor,		Ramanagar District Phone No: 27276047

11	District Officer, Backward Classes & Minority Welfare Department, #B 4, Second Floor, District Complex, Shidlaghatta Road, Chikkaballapura-562101.		Ramanagar District Phone No: 27276047 Email-id: dobcmramanagara@gmail.com				
	Chikkaballapura District Phone No:08156-277049/53 Email-id: dobcmchikkaballapura@gmail.com	27	District Officer, Minority Welfare Department Above Chairman's Office, 2 nd Floor, Zilla Panchayat Building, Avenue Road,				
12	District Officer, Minority Welfare Department, Moulana Azad Bhavan,1st Floor, Old Kent Road, Pandeshwara Mangaluru-575001.		Kuvempunagar, Shivamogga-577201. Shivamogga Distritc Phone No: 08182-220206 Email-id: domshimoga@gmail.com				
	Dakshina Kannada District Phone No:0824-2211078 Email-id: dkminorityofficer@gmail.com	28	District Officer, Minority Welfare Department 1 st Main, 1 st Cross, Shivanilaya, Gandhi Nagar, Tumakuru-572101, Tumakuru District				
13	District Officer, Minority Welfare Department, 44, 'A' Block, 2nd Floor, District Administrative Building, Karur Cross, Harihara Road, Davanagere-577006, Davanagere District Phone No:08192-250022 Email-id: domdvg1@gmail.com		Phone No: 0816-2273724 Email-Id: dobcmtumkur@gmail.com				
			District Officer, Minority Welfare Department Old D.C Office Compound, M.G Road, Mini Vidhana Soudha, Karwar-581301. Uttar Kannada District ,				
14	District Officer, Minority Welfare Department, Behind R.N.Shetty Stadium, KHB Colony		Phone No: 08382-220336 Email-id: domuttarkannada@gmail.com				
	Dharwad District. Phone No:0836-2445590 Email-id: domdharwad@gmail.com		District Officer, Minority Welfare Department, Room No: C-4, Second Floor,				
15	District Officer, Minority Welfare Department, Rishab Plaza, 2 nd Floor, Opp. Police Quarters Mulgund Naka, Gadag-582101. Gadag District. Phone No:08372-233936 Email-id: domingadag2013@gmail.com		District Offices Complex, (Mini Vidhana Soudha) Chittapura Road, Yadgiri District-585202 Phone: 08473-253742 Email Id: dobyadgiri0@gmail.com				

GOVERNMENT OF KARNATAKA Directorate of Minorities

20th Floor, V.V. Towers, Bangalore – 560001 Website: <u>www.gokdom.kar.nic.in</u>

APPLICATION FOR AWARD OF SCHOLARSHIP AND FEE-REIMBURSEMENT FOR STUDENTS OF MADARASA UNDER MODERNIZATION OF MADARSA SCHEME FOR THE YEAR 2017-18

	LAS	ST DATE	TO APP	2LY: 3	<u>80.06.2017</u>					
eligible to 2) Scholarsh Moulvi an 3) Scholarsh Graduatic 4) Madrasa St	apply. ip will be d other ec ip and Fee on/Post-Gr tudents ap tudents wh	awarded to quivalent co -Reimburse aduation in plying Scho no have app	o Madrasa ourses in Ma ment will b NIOS/ IGN larship first blied for 201	stude adrasa be awa NOU & t time 16-17 I	rded to Madrasa other governme need to apply as Madrasa scholars	course a stud ent rec 5 FRES ship a	es i.e., Aa ents stud cognized (H. nd Fellow	alim, ying Oper vship	, Fazil, Hafiz, SSLC, PUC, n Universities. o need to appl	Nazira, ly as
Registration No. (For office use only)							Pho	togra	ort Size aph to be d here	
		Р	ERSONA	L DE	TAILS					
1. Type of Students Fresh (If applying for First Time) Renewal (If applied for 2016-17 Scholarship & Fellowship)							p)			
2 .Student's Name										
3.Date of Birth (DD/MM/YYYY)	DD	MM	YYYY	′ <u>4</u>	GENDER:	Mal	e	Fe	emale	
5.Place of Birth	VILLAGE/TOWN		[DISTRICT		STATE		PIN CODE		
6. Education Qualificatio (Mention the class/ Degree If		didate								
7.Father'sName										
8.Occupation of Father/Mother/Guardian										
										Page 1

	-													
9.Annual Family Income from all sources (Enclose self- declaration format)														
10.Religion					11. AA		R Ca	ard						
	Others	Others (Mention)			Number									
12. Mobile No.	13. Pre	13. Present Address in Full			ull	14.PermanentAddressinFull								
15.EmailID:	Talu Dist Stat	Village/Town/City: Taluk: District State: Pin code:				Village/Town/City: Taluk: District: State: Pin code:								
16. Name, address & Mo of the Madarasa studyin).												
17. Type of Madrasa	Reside	ential		Day	/ Sch	olar [
18. Present course undertaken	Aalim Fazil Hafiz Nazira Moulvi Others													
19. Year in which studying	1 st y	1 st year 2 nd Year 3 rd Year												
20. Have you availed any Scholarship for this Madrasa course from any Government Department.														
	1	(DATE	S BA	NK DE	TAIL	S						
Bank Name:														
Branch Name														
Full Account Number:														
IFSC Code:														
													Pa	age 2

PARTICULARS O	F ACADEMIC /EDUCATIONAL QUALIFICATION (If Any)	
1.Current Qualification Level		
2.Name of Class/ Degree/ Qualification obtained in Previous Examination		
3.Name of the School/ College & Affiliated University		
4. Aggregate Percentage of Marks / CGPA obtained in Previous years/Semesters during the last course		
5. For Students pursuing correspondence courses in NIOS/ IGNOU & other Government recognized	Course SSLC PUC Graduation PG Others Name of the Institute	
open universities	NIOS IGNOU other (Please Specify)	
	Admission/ Registration Fee Rs. (Enclosed Admission/ Registration Certificate & Fee Receipt)	
ATTESTED COPY OF FO	LLOWING DOCUMENTS TO BE SUBMITTED ALONG WITH THE APPLICATION FORM (CHECK LIST)	
1. Income & Caste Certificate - S	Self Declaration (As format enclosed with application)	
2. Study Certificate issued by M	adrasa (As format enclosed with application)	
3.SSLC/ PUC marks card (If	completed)	
4. Marks card/ Transfer Certific	ate (if had pursued any education)	
•	gistration Certificate (For Students pursuing correspondence or Government recognized open universities)	
6. Applicants Bank Account, Pas and Bank Address	ss Book Xerox copy with Account Number, IFSC Code	
7. Xerox copy of Aadhar Card.		

DECLARATION

I S/o /D/o/W/o ______residing at the above given address have furnished the information and documents as per my academic qualification and certificates issued by the college/Madarasa authorities concerned. They are true and correct to the best of my knowledge.

I declared that I have not utilized any other scholarship earlier from any Government Department/s.

If I am selected for the above Scholarship to study Aalim, Fazil, Hafiz, Nazira, Moulvi and other equivalent courses submit that Is hall study and complete the course without break.

In case any of the information furnished by me and the documents enclosed are found to be incorrect or false, I shall be liable to be taken action against me as per the existing rules of the Government and Department.

Signature of the Student

Place:

Date:

NOTE:- Filled in applications must be sent to District office, Minority of respective Districts, On or before the last for submission of this application. Kindly write "SCHOLARSHIP/FEE-REIMBURSEMENT FOR STUDENTS OF MADARASA UNDER MODERNAZATION OF MADARSA SCHEME 2017-18" on the Envelope before sending it to the District office, Minority. Applications submitted after the last date of submission will not be accepted and incomplete application will also be rejected.

STUDY CERTIFICATE ISSUED BY MADRASA TO ITS STUDENTS FOR SCHOLARSHIP AND FEE REIMBURSEMENT FOR STUDENTS OF MADRASA UNDER MODERNAZATION OF MADARASA SCHEME

STUDY CERTIFICATE

I,		Secretary/Principal/Head of
		a)
	fied that.	do hereb
a)		(Name of the Student) is a student of our Madrasa.
b)	He /She is studying in	(Aalim/ Fazil/ Nazira etc.) Course
	in the academic year	·
c)	His /Her admission / Registr	ation / Enrollment Number in Madrasa is
d)	He /She is a residential Stud	ent in our Madrasa.
Date		
Place	e:	
	Signature of Secretary/Prine	cipal/Head of Madrasa:
	Name of Secretary/Principa	al/Head of Madrasa:
	Name of the Madrasa:	
	Address of Madarasa:	
		Seal and Signature
		Page

GOVERNMENT OF KARNATAKA

MINORITY WELFARE DEPARTMENT

SELF DECLARATION OF FAMILY INCOME AND MINORITY COMMUNITY (CASTE) FOR SCHOLARHSIP & FEE REIMBURSEMENT TO STUDENTS OF MADARASA UNDER MODERNAZATION OF MADARASA SCHEME

DECLARATION BY MADRASA STUDENT

I, _	Son/Daughter/of
Re	sident of (Full address)
do	hereby solemnly affirm and declare as under: -
a)	That I am citizen of India.
b)	That annual income of my family from all sources in Rs(in word also)
	That I belong to the community which is a notified minority community as per section 2(c) of National Commission of Minorities Act, 1992. I declare that my father/mother/both* is/are earning Member(s) in my family.
2.	I certify that the above information given by me is true.
me	In case this information furnished by me is found false, the financial assistance awarded to may be recovered with penal interest and I will be liable to a legal action against me in cordance with law.
	Signature of Candidate:
	Name of Candidate:
	Name of the Madarasa:
	Enrolment No. in the Madarasa:
	Academic Year: