

FORM NO:	
----------	--

INDIABULLS FOUNDATION SCHOLARSHIP 2017-18

APPLICATION FORM FOR NEW STUDENTS

Name of student:-	
Course Name:	Recent Passport Size
Name of College/ Institute:	Passport Size Photo
Current Year of Study:-	

Note:

- A duly filled application form has to be submitted to the concerned department of the Institute/ Indiabulls Foundation.
- Incomplete applications will not be accepted.
- All the documents should be self attested by the candidate
- The following supporting documents must be submitted along with the application form:
- I. Photo identity proof of applicant (Aadhar card/ Voter I card/PAN card/Driving license etc.) and College Identity Card.
- II. Photo identity proof of applicant Parent's/legal guardian (Aadhar card/ Voter I card/ PAN card/ Driving license etc.).
- III. Residential proof of applicant's Parent's/legal guardian (Ration card {MANDATORY}, Telephone bill, Electricity bill {MANDATORY} etc.).
- IV. Proof of gross family income per month (Income certificate/ latest IT returns/ Form 16/ latest Salary Slip/ Letter from employer).
- V. Attested copies of all mark sheets and certificates in support of your educational qualifications.
- VI. Attested copies of MT-CET/AIEEE/IIT-JEE or other score cards as per the students course preference
- VII. College prospectus as a proof of course fees/college fees structure for current academic year.
- VIII. Post Admission Process: Proof/ Receipt of admission (MANDATORY)
 - IX. Post admission process: Duly sealed & signed Declaration by the Head of Institute/University (Pg 5)



PERSONAL INFORMATION

Full Name:				
(First	Name)	(N	Middle Name)	(Surname)
Date of Birth:			Sex:	(Male/Female)
Marital Status :			(Married / Unm	arried/ Divorce)
		_	Mobile No_	
Mother's Name: _		Occupation _	Mobile No_	
Husband's Name:		Occupation	Mobile No	
BPL Card No	Date of Iss	ue	Issuing Authority	[If Applicable]
Correspondence A	Address:			
Permanent Addres	ss (if different from Cor	respondence Add	ress):	
•	, , ,			
Mobile No {STUI	DENT}:			
FAMILY DETA	AILS (in relation to t	the student)		
Relationship	Name in full	Age	Occupation/ Name of the Organization	Income (Monthly)/ Fees (Annually)
D. 6.		<u> </u>		
References (man	datory): : Name		Contact no	
-	r: Name			
	er: Name			
	Name			
emproyer or sen:	maile		Contact no	



ACADEMIC & ADMISSION DETAILS (CURRENT)

Name of Course			·····		
Specialization / Discipl	ine /Branch				
Duration of the Course		(Sem	ester –wise / year wise	e)	
Currently which semes	ter/year				
Name of Institute					
Address of Institute					
Contact Person / Colleg	ge Authority		Contact	No	
Last date of admission					
Student I Card No / Ro	ll No				
Received any subsidy of					
If Yes then specify			•		
ACADEMIC DETA					
Please provide the aca					T 1
Certification/	Subjects/	Board/	Year of passing	Overall %	Rank/
Degree	Specialization/	University		(convert CGPA	Grade
	Stream			into % as per	
				AICTE norms)	
* EOD GELIDENIEG I	WIO ADDEADED	EOD ME CEE			
* FOR STUDENTS V	VHO APPEARED	FOR MT-CET/	AIEEE/IIT-JEE OR	EQUIVALENT	
Please provide the rank	in the qualifying en	ntrance examinat	ion for course in which	h you are enrolled	
Examination Name					
Conducted by	Do	nk	Marke (in	06)	



DECLARATION BY THE STUDENT hereby declare that the information provided above and in the enclosed documents are true and correct to the best of my knowledge. If any of the information furnished above is found to be incorrect at any stage, my application for the scholarship is liable to be cancelled. I agree that to be able to continuously receive IBF scholarship till the completion of my course I need to score minimum 50% in all exams of the said course. I also understand that Indiabulls Foundation or any company or subsidiary of Indiabulls Group is not liable to provide me any kind of employment anywhere after the completion of this course. I cannot receive any other scholarship from any other source. If known, this scholarship will be immediately revoked and cancelled. Indiabulls Foundation will not be liable if the Demand Draft that is issued is misplaced or lost by me. Indiabulls Foundation holds the right for Legal Action against me if found the scholarship is misused. I take the entire responsibility to refund the money to Indiabulls Foundation in case I withdraw from the course during the academic session or change the institute/college. Signature: (Student) Date: _____ Place: _____ Signature of Father/ Mother/ Husband/ Guardian Date: ______Place: _____



For University/Institute use Only (Post Admission Process)

DECLARATION BY THE HEAD OF INSTITUTE

I solemnly declare that the Institute/ College	is a deemed
University/under	
Central Govt. /State Govt. or fully owned by Central/State Govt	
Departments.	
I also declare that the above information furnished by the candidat	
who is studying in (course and discipline)	
is true and correct in all respect to the best of my knowledge and a	
recommend his/her candidature for the Indiabulls Foundation Scho	plarship as the student belongs to an
economically challenged category.	
Signature:	_
Nomo	
Name:	
Designation:	
Designation	-
Date: Place:	
1 ldc1 ldc.	
Seal of Institute	