

**DOCUMENTS TO BE ATTACHED:**

<b>Required Document</b>	<b>Yes/No</b>
Proof of admission letter/call letter issued by the institute. -----OR-----	
Annexure I-with institutes preference where student is seeking admission	
Annexure II- letter from colony leader stating the candidate is residing in the colony	
03 Passport size photographs	
Self attested Birth certificate/proof of age	
Self attested Mark sheets for 10 <sup>th</sup> & 12 <sup>th</sup>	
Self attested Leprosy Certificate of parent/s	



7. Date of Birth *(Please Enclose Age Proof)*

D	D		M	M		Y	Y	Y	Y

8. Who is affected by Leprosy

Father	
Mother	
Self	

9. Details of Educational Qualification: 10<sup>th</sup> & 12<sup>th</sup> *(Please Enclose Certificates)*

Examination Passed	Board/Council	Main Subjects	Year of Passing	Marks (%)	Division
10th					
12th					

10. Name of the course you have been selected for. *(Attach admission letter/Call letter) else, fill the Annexure-I*

Name of the course	
Name of the institute	
Address of the institute	
Whether recognised by Indian Nursing Council (Yes/No)	

I..... (Name of the Applicant) hereby declare that to the best of my knowledge the above information furnished by me is true and I understand that if at any stage, it is found that the information provided by me is false/ not true, all the benefits given to me under "Nursing Scholarship for girls" could be withdrawn.

Date:

Signature:

**ANNEXURE I**

I.....daughter of.....residing in.....colony, want to pursue B.Sc. in Nursing In academic year 2018-2019. I will be taking the following Entrance Examination for admission into B.Sc. in Nursing

1. .... (Name & address of the institute)
2. .... (Name & address of the institute)
3. .... (Name & address of the institute)

**ANNEXURE II**

**Declaration Form (To be filled up by the Colony Leader)**

I..... (Name of the colony leader) hereby certify that Miss..... has been residing in this colony.....(Name of the Colony) and her parent/parents.....(Name of the parent/parents) is/are affected by leprosy.

I certify that, to the best of my knowledge, the information provided by the candidate is true. I recommend her for SILF's Nursing Scholarship for girls Programme.

Date:

Signature: