



Application Form For  
**K.E.I. Scholarship**



**Iqbal Memorial Trust** (Iqbalabad, Bemina, J&K)  
*in collaboration with*  
**Kashmir Education Initiative** (Kashmir & USA)

Form No.: **KEI/**\_\_\_\_\_

**PART 1**

**Student Name:** \_\_\_\_\_

Date of birth: \_\_\_\_\_ \ \_\_\_\_\_ \ \_\_\_\_\_ Present Class: \_\_\_\_\_

Contact No1: \_\_\_\_\_ Contact No2: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_ Distt: \_\_\_\_\_ Pin Code: \_\_\_\_\_

Name of the school currently studying in: \_\_\_\_\_

School Address: \_\_\_\_\_

School Phone: \_\_\_\_\_ Principal's Mobile: \_\_\_\_\_

Attach a passport  
size photo attested  
by School  
Authority

*Please do not staple.*

**ACADEMIC RECORD**

Class	School	Year	Board Number	Roll	% Marks of DIET External (T2)
8 <sup>th</sup>					

Names of any scholarships/organizations (other than KEI) to which the applicant has applied and /or is receiving from at the time of filling this form:

*I declare, under oath, that all the information furnished is true to best of my knowledge.*

**Students Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name & Signature of Parent/Guardian:**

**Attested by Principal with Name & School Stamp:**

\_\_\_\_\_ **Date:** \_\_\_\_\_ \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE:** In case any information provided by the applicant is found to be false or misleading, his/her application will be immediately rejected without any notice.

This form is available free of cost. In case you need assistance with filling this form, call us at any of the following numbers:  
0194-2414104, +91 9469156958 (between 10am to 5pm)

**PART 2**

Name of Guardian(s)	Relation with Applicant	Occupation	Annual Income

Total School going children in family: \_\_\_\_\_

**INCOME & FINANCIAL DETAILS:**

a. Father's gross annual salary/income: Rs \_\_\_\_\_

b. Mother's gross annual salary/income: Rs \_\_\_\_\_

**INCOME FROM:**

c. Agriculture: Rs \_\_\_\_\_

d. Orchard: Rs \_\_\_\_\_

e. Other sources: Rs \_\_\_\_\_

**Total Gross household annual income from all sources (a,b,c,d,e): Rs \_\_\_\_\_**

*"I, the undersigned parent/guardian of the applicant, declare that the information given above is true. I understand that the Merit-cum-Means Scholarship, if awarded to my ward, is liable to be withheld or discontinued at the discretion of the Board of Directors of KEI, without assigning any reason. I shall also be personally held responsible for the refund of the scholarship amount (paid to my ward by KEI) in the event of any information in this declaration or in the enclosed scholarship application form, being proved incorrect at any point of time."*

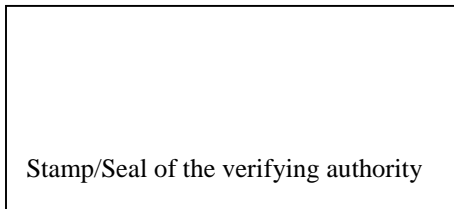
**Signature of the Parent/ Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Address with Pin Code:** \_\_\_\_\_

**Contact No.1:** \_\_\_\_\_ **2:** \_\_\_\_\_

**Signature with name & official stamp of Tehsildar OR president of local masjid committee/auqaf**



\_\_\_\_\_ **Date:** \_\_\_\_\_ **Contact No.** \_\_\_\_\_

*If any of the parents/guardians are salaried employees (who are in full or part time, government or private employment) a Last Pay Certificate (LPC) duly stamped & sealed by the Salary Disbursing Officer must be submitted, in addition to the above certificate.*

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