



Application No :
(For Office use)

Government of Kerala
Backward Classes Development Department

Application for OBC Postmatric Scholarship for CA,CMA,CS 2018-19

1. Name of the candidate :
2. Name of Father/Mother/Guardian:

Affix a recent
stamp size
photographere
duly signed

3. **Address**

Permanent Address (With District & Pincode)	Address for Communication (With District & Pincode)
<input type="text"/>	<input type="text"/>
Phone No with STD code :	Mobile No :
Email (if any) :	

4. Date of Birth 5. Religion 6.caste
7. Gender 8. Aadhar No. 9. Annual Income

10. **Details of Present Institution and Course**

Name & full postal address of Institution with pin code	
<input type="text"/>	Course : CA / CMA/ CS Stage : Intermediate/Final
Type of Institution : Govt/Aided/Self Financing	
Email : Website (if any) :	

11. Are you enjoying any other scholarship from any agency ?
(If yes, Specify the details)
12. Mention whether Day Scholar or Hosteller
- a) If day scholar, mention the distance between residence and the institution (in kms)
- b) If hosteller, mention the monthly hostel fee & other expenses (in rupees)

13. **Bank Account Details of the Applicant**

- 1) Name of the account holder :
- 2) Account Number :
- 3) Name of Bank :
- 4) Branch :
- 5) IFS code :
- 6) Phone No. of the bank :

(P.T.O)

Declaration of the Applicant

I ,(Name & address) hereby declare that I am studying in (Name of institution) which is situated in Kerala; and the details filled in this application are true to the best of my knowledge and belief. If any state, it is found that the information given by me is false, the scholarship granted to me could be withdrawn and legal action as deemed fit, may be taken against me.

Place :

Signature of the student

Date :

Enclosures should be attached

<ul style="list-style-type: none">❖ Income Certificate❖ Caste Certificate❖ CA- Acknowledgement letter for payment of fees/ Registration form ICAI❖ CS- Acknowledgement letter for payment of fees/ Registration form ICSI❖ CMA- Acknowledgement letter for payment of fees/ Registration form ICMAI	<ul style="list-style-type: none">❖ Bonafide Certificate❖ Hostel Inmate Certificate from competent authority (in the case of hostellers)❖ Copy of Identity Card from the institution❖ Copy of Aadhar
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For Office Use

OBC Postmatric Scholarship for CA/CMA/CS 2018-19

Government of Kerala

<u>Personal Details of the applicant</u>		
Name of applicant		
Name of parent		
Date of birth		
Permanent address		
Religion & Caste		
<u>Course Details</u>		
Name of Course	CA/CMA/CS	Intermediate/Final
Date of admission	Admn. No :	
Duration in years		
Current year		
Type of course	Full time/Part time	
Fee remitted	Rs.	

Name & signature of the applicant

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Bonafide Certificate

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1. Certified that the above furnished details are found true with reference to the certificates and records kept in this institute.
2. Certified that the student is not in receipt of scholarship from any other agencies.
3. Certified that the attested copy of the fee structure (specify refundable & non-refundable fee) approved by state/central government is attached.
4. Certified that the student attends classes regularly and his/her average monthly attendance is more than 80%.
5. Certified that the character & conduct of the student is satisfactory/good.

Place :
Date :

Office seal

Name & Signature of the Head of Institution
(Designation Seal)