State to which the applicant belongs :.....

Applicant must affix a pass port size photograph with his/her signature thereon

FRESH APPLICATION FORM

FOR POST-MATRIC SCHOLARSHIP TO THE STUDENTS OF SCHEDULE TRIBE/ OTHER BACKWARD CLASSES, MORE OTHER BACKWARD CLASSES STUDENTS OF ASSAM PURSUING POST-MATRIC COURSES DURING: 2017-18

LATE, INCOMPLETE OR DEFECTIVE APPLICATION WILL BE IMMEDIATELY REJECTED

SUMMARY

1.	Full	Name in English								
2.		Name in Recognisedcial Language								
3.	Ger	nder								
4.	Add	ress 1 : House Number / Colony								
5.	Add	ress 2 : Village / Ward								
6.	Add	Address 3 : Gram Panchayat / Town								
7.	Add	ress 4 : District								
8.	Add	ress 5 : State								
10.	Day	Scholar / Hosteller								
11.	Ban	k Name								
12.	Acc	ount Number								
14.	Aad	haar Number15. Contact No. of the Student/ Guardian:								
16.	Aca	demic Year								
17.	Insti	itute - Full Name in English								
18.	Con	nmunity Religion								
19.	Clas	ss								
20.	Cou	rse of study undertaken								
21.	Res	ult of the last university/Board/Annual Examination								
	(a)	Name of the Examination Passed								
	(b)	Name of the Institution from which appeared and passed								
	(c)	Year of Passing Division or Class obtain								
	(d)	Total marks obtained Percentage of marks obtained								
22.	(a)	Name of Father Shri/Late								
	(b)	Name of Mother Smt./Late								
	(c)	Name of Guardian if both parents are not alive								
	(d)	Name of Husband (if married)								
	(e)	Occupation								
	(f)	Whether employed in Government or Private service								

	(g)	If retired from Service furnish exact date of retirement
22.	Tota	al annual income of parents/guardian/husband and self, if any from all sources ending
	31s	t March
N. B	.:	So long father or husband (in case of married unemployed Woman) is alive only the income of the father/husband (as the case may be) from all sources should be furnished in page 5 Annexure II and in the form of income declaration (A) Annexure III page 6, including Schedule income is to be declare on this basis. In cases where father has died the income of the mother and when both parents (or husband in the case of married but unemployed girl student) have died the income of the guardian who is supporting the student in his/her studies should be furnished.
		FRESH APPLICATION FORM FOR GOVERNMENT OF INDIA/ASSAM POST-MATRIC SCHOLARSHIP
		N.B.: This Application should be submitted to the
		(a) SDWO for OBC students (b) Project Director, I.T.D.P. for ST Students.
		where the Institution located (with in the state of Assam)
		through the Head of the Institution.
		(c) The Director of W.P.T. & B.C. for the students studying out side the state.
(1	го в	PART (A) BE FILLED IN BY THE APPLICANT IN NEAT AND CLEAN HAND WRITING)
1.		me of the applicant in fullblock capital letter, Woman candidate should indicate Miss or Mrs.)
2.		e of birth in Christian era and to be supported byested copy of matric or equivalent examination certificate)
3.	Fati	her's/Guardian's/Husband's name in fullcase of married woman students husband's particulars are invariably required)
	(a)	Occupation Department Designation
4.	(a)	Permanent Address of Father/Husband
		Village/Town
		P.O
		Mouza Dist
	(b)	Present Address in full
		Village/Town Municipality Ward No
		P.O
		Mouza Dist. State
5.	App	olicant's occupation, if any
6.	Wh	o supports you in your study, i.e., Father/Mother/Guardian/Husband
	(a)	Name

(b) Full address

7. Name of Children receiving Post Matric/Post Education during:

8.

9.

SI	Name of the Student	Class in which	Name of the	Whether in receipt of Scholarship					
No.		Reading	institution	if so give Prosecuting studies					
		84.9	where	particulars allotted Number					
				and whether fresh or renewal					
Wh	ether the candidate a	pplied previous	sly and already	in receipt of scholarship under					
sch	scheme during Please furnish particulars with allotted number								
Cla	Class in which the applicant was studying during:								
(ii)									

	be given here
(a)	Activities during the gap period
	(A prescribed declaration form, which is available with the head of the institution is to be filled up and signed by both student and Parent' guardian and also to be countersigned by the
	head of the Institution where the students is prosecuting his studies to be furnished without
	which the application will be rejected)

b)	Whether the	student	was	studying	in	any	institution	after	passing	the	last	annual/final
	examination a	and if so,	nam	e of the in	sti	tutio	n					

c)	If study was discontinued, state reasons of the discontinuance
d)	Were you awarded scholarship of the course of which you could not complete?

10. Particulars of examinations taken commencing with the Matriculation or equivalent examination please furnish attested copies of certificates and mark sheets. Attested copy of matric or equivalent examination certificate should invariably be attached without which the application will be rejected.

						~	
	Examination taken	Date which examination taken	Year in which examination passed	Class	% of Marks secured in the Examination	Class or division obtained in the Examination	Name of the Institution from from which passed
1.	H.S.L.C. Certificate						
2.	Higher Secondary						
3.	Pre-University						
4.	B.A./B.Sc./ B.Com.						
5.	Indian School Certificate						
6.	1st MBBS/ Engg.I/II						
7.	MBBS/						
8.	M.A./M.Sc./ M.Com. Prev.						
9.	M.A./M.Sc. M.Com. etc.						
10.	BT/LLB. Prel, Imt.						
11.	Any other Post-Matric Course with name						

		[4]
13.	Par	ticulars of the last annual examination taken by the students.
	(a)	Whether regular pass or compartmental or supplementary or provisionally promoted
	(b)	Date of Passing or failing
	(c)	Did he/she pass in one sitting
	(d)	Whether promoted to the next higher class or detained.
	(e)	If candidate did not pass whether placed in compartmental or supplementary.
	(f)	Roll No. of candidate at University/Board Examination.
	(g)	University Registration No. and Year of Registration
14.	Whe	ether the candidate was in receipt of scholarship under this scheme or any other scheme in
	the	preceding Year Yes or No If yes, please indicate
	(a)	Name of the scholarship scheme
	(b)	Course of study for which the scholarship was awarded
	(c)	Year and class of the scholarship enjoyed last
	(d)	Name of the institution in which the scholarship was awarded
	(e)	Sanctioning No and date
	(0)	Alloted No
15	Car	
15.		irse of study for which the scholarship is now desired :
	(a)	Whether full time or part time course
	(b)	Whether day time or evening time or morning time
	(c)	Class in which studying this year
	(4)	
	(d)	Subjects taken at (c) above
16.		ether residing in the hostel of the Institution or in a approved hostel
	Yes	or No (Certificate from Hostel Superintendent is to be attached)
	If ye	s, give its name
	(a)	Address
	(b)	Exact date of joining
17.	0.000	sument to be attached:
	(a) (b) (c) (d)	Part "B" of application form duly completed and signed by the Head of the Institution. Caste and Citizenship Certificate (Annexure-I) Income Certificate (Annexure-II) In come declaration (Annexure-III)
	then We us o	e hereby declare that I/We have read the regulation of the scheme and agree to abide by the terms and ditions of the award. I/We certify that the statement made in the application are correct and if any of in is found to be false or incorrect by the authority whose decision will be final and binding on me/us. I/ undertake to refund to the said authority on demand and entire amount of scholarship received by me/or overpaid to me/us failing which the said authority may recover the amount from me/us though whatever are it deems proper.

Signature/Left/Right hand thumb impression of the parents/guardian/husband (as the case may be) Relationship to student

Signature of the applicant

Dlace .	Data	¥7.
Place.	 Date.	

ANNEXURE I CASTE AND CITIZENSHIP CERTIFICATE

(i) This certificate is to be signed by the DEPUTY COMMISSIONER OF THE DISTRICT OR SUBDIVISIONAL Note: OFFICER (CIVIL) OF THE SUB-DIVISION (Where the parents/Guardian of the candidate is permanently residing) or Commissioner for Schedule Caste/Tribes. (ii) This is a very important document as the scholarship is awarded mainly on the basis of this certificate. The issuing authority is therefore, advised to issue this certificate with due caution (iii) The particulars must be filled in by the issuing authority in his own handwriting _____ I certify that to the best on my knowledges that Shri/Kumari/Shrimati (Name of the Student)..... Son/daughter/wife of Shri (name of father/husband) Mouza District Stateis a citizen of India. Shri/Kumari/Shrimati (name of the student) belongs to the Caste/Tribe Sub-Cast/Sub-Tribe...... and his/her religion is Place : *Signature of the issuing authority Date : Full name in capital letters Designation (*Stamped Signature will not be accepted. **Certificate not bearing the Seal of issuing authority will not be accepted.) ANNEXURE II **INCOME CERTIFICATE** Certificate to be submitted from: SDC/BDO/Mouzadar in case of guardian is cultivator. (2) Employer in case of Govt./Qusai Govt. employees. Income tax officer in case of Businessmen. (4) Proprietor if the guardian is employed in private farm. Certified to the best of my knowledge that Shri/Shrimatifather/mother/guardian/husband of Shri/Shrimati Village District State Profession is and his/her total annual income from all sources (including student's own earning, if any) in the preceding year ending 31st March was Rs...... was Rs..... (Rupees only). Countersigned by **Signature of the Income Tax Officer Signature of D.C. S.D.O S.D.C. B.D.O./Mouzadar/Employer/Proprietor Full Name Full name Designation Designation

(*Stamped Signature will not be accepted. **Certificate not bearing the Seal of issuing authority will not be accepted.)

Date

Place

ANNEXURE III

FORM OF DECLARATION OF INCOME (FORM-A) (TO BE GIVEN BY PARENTS GUARDIAN WHEN PARENTS ARE ALIVE. FOR MARRIED FEMALE CANDIDATE HUSBAND'S DECLARATION IS REQUIRED)

	Whe	ereas my son/daughter/dep	endent Shri/Miss/S	nrimati (in case married female candidate)
			Student of	
Co	lege ł	nad applied for grant of a sch	olarship	
I SI	nri		son of Shri	
Ad	dress	Village	P.O	
Dis	trict		State	Declare that my
tota	al ann	ual income from all sources	in the preceding yea	ar ending 31st March
als her pai I fu I sl	o affir eunde d by n rther u nall re dent)	rm that particulars of prope er) and that I have correctly ne. I make myself personally undertake that in the event of fund to the President of Ind	erty held by me are indicate the amount y responsible for the of the particulars give dia the whole amount.	(as per details furnished below. I (as per details furnished in the Schedule of various taxes, cases and land revenues accuracy of the facts and figures furnished. In in this declaration being found to be false. In the Scholarship paid to (name of the condition), and the Government's decision or whether binding on me.
I fu	rther o	declare that I am a permane	ent resident of the St	ate of
and	d belo	nging to (Sub-caste	carryin	g my profession's as
		JLE PARTICULARS TO BE FUR	NISHED BY ALL CAN	DIDATES, IRRESPECTIVE OF ANY CASTE AND IN WILL BE REJECTED OUTRIGHT
I.	EXT	ENT OF LAND HELD	(as	owner or tenant)
	(i)	Areas :	(ii)	Village:
	(iii)	Survey No./Patta No.:		Mouza:
	(iv)	Land revenue assessment	:	
	(v)	Under Mouza :		
II.	PRO	OPERTY HELD	(Ho	uses, Shops, house-sites, etc.)
	(i)	House No.:	(ii)	Street:
	(iii)	Village/Town/City:		
	(iv)	Area of site :	(v)	Rent derived if any :
	(vi)	House-tax paid:		
	(vii)	Address of shop:		
	(viii)	Nature of Business :		
	(ix)	Sales-tax/income-taxes pa	id:	
	(x)	Licence No. :		

III.	SALARIES DRAWN					
	(i)	Name of the Employer :				
	/::\	Office/Unit in which he/o				

(ii) Office/Unit in which he/she (is) working with designation :

(iii) Full address with designation

Monthly emoluments (including all deduction)

(a) Basic Pay Rs.

(b) Allowances Rs.

(c) House Rent Rs.

(d) Other Requisties Rs.

Total Rs.

Signature of the Employer with SEAL

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OIF	IER					
	(i)	Income from subsidiary industries, part-time occupation				
	(ii)	Amount drawn as wages				
	(iii)	Any other income				
N.B.	.:	Father/Husband (in case of married unemployed woman) if alive signature of Father/Husband (as the case may be) is acceptable.		Signature of left/right thumb impression of parent/guardian/husband as the case may be.		
Place : Name :						
Date:			. Address :			

PART B

TO BE FILLED IN BY THE HEAD OF THE INSTITUTION WHERE THE **APPLICANT IS STUDYING**

(i)	The Statement made by the applicant in part (A) are correct to the best of my knowledges.		
	Caste Certificate has been checked		
(ii)	Character conduct and attendance of the applicant (general review)		
(iii)	Whether regular pass or supplementary of Provisionally promoted		
(iv)	If provisionally promoted the name of the back subject to be cleared		
(v)	Whether you remommend the applicant for the award of scholarship		
(vi)	Duration of the course which the aplicant (a)		
	Months is studying in your Institution		
(vii)	Whether Degree/Diploma Certificate/Trade Professional Course		
(viii)	Authority issuing the above Degree etc.		

(ix)	Date	Date of commencement of the current Academic Session of the course							
(x)	Exa	Exact date on which the applicant joined that course/class this year							
(xi)	Like	Likely date, month and years on which the annual examination in the current session will be over							
	(inc	ludin	g practical subject	s)					
(xii)	(a)	Is th	ne applicant exemp	ted from payment of tuition fee	es	Yes or No			
	(b)	If ye	es, please indicate	whether examination is for full	/half tuition fees				
(xiii)	(xiii) If the applicant is residing in an approved hostel, please indicate if her/she is entitled to free								
	board/free lodging								
(xiv)	(xiv) Exact date of admission in the hostel								
(xv) The designation and full address of the head of Institution to whom the scholarship amount in									
	resp	ect (of this student may	y be sent					
(xvi)				p pay the following fee during	170	which are not			
	reim	burs	sed by Sate Gover	nment or from any other sour	ces.				
N.B	.: Th	ne He	ead of the Institution	n is to see that no other fee ch	arged excepting the	fee as listed below :			
					Course Amount payble for the year Rs. P.	Course Amount for the year Rs. P.			
	(a)	Enr	olment or Registra	tion fee					
	(b)	(i)	Tuition fee						
		(ii)	Science or labora non Refundable p						
	(c)	Gar	ne fee						
	(d)	Unio	on fee						
	(e) Library fee								
	(f) Common Room fee								
	(g)	Mag	gazine fee						
	(h)	Med	dical examination f	ee charged by the institution					
	(i)	Exa	mination fee						
	(j)	Cha	arged by the Institu	tion/University					
				Total fees payable during					
			'						
	Signature of the head of the institute with Seal								
For	He		the Office of the						
Director, WPT&BC Assam/PD, I.T.D.P./Sub-divisonal Welfare Office									
		270	sed for payment	Rs.					
Checked by									

Certified that this Institution is affilated	d to the					
University/Board	and is recognised by the Government of					
India/State Government of	in the year					
of The applicant is stud	ying course					
in the Institution and the minimum qualification required for admission to the course is passed						
in the	Examination.					
I undertake that the scholarship amou	unt in respect of the applicant if any when placed at					
my disposal will be disbursed by me for	the specific purpose for which it is given and the					
accounts will be regularly reported to the authority which awarded the scholarship. In case						
the applicant leaves the institution or otherwise discontinue the studies or accepts any other						
regular scholarship/stipends the fact will be immediately reported to the said authority and						
payment of scholarship to the applicant will also be discontinued. The undisburshed amount						
lying with the Institution on account of maintenance charges, fees etc. will also be refunded						
in the Government account.						
	* Signature of the Head of the Institution and Seal					
	(Stamped signature will not be accepted) Name in capital letters					
	Designation					
	Full Address					
No						
Place						
Date						

ESSENTIAL POINTS

- (1) Wheather Cast Certificate has been furnished.
- (2) Wheather Income Certificate has been furnished.
- (3) Wheather gape-period Certificate (where required) has been attached.
- (4) Wheather Marksheet has been attached.
- (5) Wheather Hostel Certificate has been attached, verified and forwarded.
- (6) Wheather SBI Bank Account Number or Nationalized Bank Account Number has been furnished.
