

GOVT. OF ASSAM
DIRECTORATE OF WELFARE OF SCHEDULED CASTES, ASSAM
(APPLICATION FORM FOR POST-MATRIC SCHOLARSHIP TO THE SCHEDULED CASTE
STUDENTS OF ASSAM)

This application should be submitted to the Project Director,
ITDP concerned through the Head of the institution

PART -I

(To be filled up by the applicant in neat and legible handwriting)

Recent coloured
passport size
photograph with
signature of the
applicant

1. **A. Name of the applicant**
(in full Block Letter).....
- B.(i) Bank A/c No.**..... **(ii) IFSC Code No.**.....
(iii) Name of Bank :..... **(iv) Branch**
- C. (i) Name of the institution with address where the student is studying**.....
.....
(ii) Course **(iii) Academic session**.....
- D. Date of Birth**
(attested copies of birth certificate/admit card to be enclosed)
- E. Whether differently abled? (Yes/No)**.....
If yes, certificate issued by competent authority to be enclosed.....
- F. Whether the course is a correspondent one? (Yes/No)**.....
- G. Applicant's occupation (if any)**
[Certificate issued by employer to be enclosed]
2. **(i) Father's/Mother's/Husband's/Guardian's name (in full.)**.....
(ii) Relationship with the student..... **(iii) Occupation**.....
(iv) Annual income (both in figure and words)..... only
[Certificate issued by competent authority to be enclosed]
3. **Permanent address: Village/Town**.....
P.O...... **P.S.**..... **Mouza**.....
District..... **PIN**.....

4. Particulars of own brother/sister of the applicant who have already availed or still availing Post Matric Scholarship under the same scheme .

Serial No.	Name of Student & relationship with applicant	Course in which reading	Name of the institution with address	Amount & Academic Year

5. Particulars of Examination passed by the applicant from HSLC onwards:

Year	Name of the Examination	Name of the institution from which passed	Board/University	Percentage of marks obtained	Division secured

6.(i) Activities during the gap period (if any).....

[A declaration in prescribed format to that effect duly signed by both the applicant and the guardian and countersigned by the Head of the Institution where the applicant is pursuing studies to be enclosed]

(ii) Whether the applicant studied in any institution after passing the last/final examination, and if so, name of the institution.....

(iii) Whether the applicant received any scholarship for the course which could not be completed? If yes, furnish details.....

7. Whether the applicant is currently residing in the hostel of the institution (Yes/No).....If Yes, give particulars.....

Declaration

I/We hereby declare that I /we have read the regulations of the scheme and agreed to abide by the terms & conditions of the award. I/We certify that the statements made in application are correct and true to the best of my/our knowledge and if any of them is found to be false and incorrect by the authority, undersigned will be liable for any punitive action as deemed fit and proper I/We undertake to refund to the said authority on demand the entire amount of scholarship by me/us or overpaid to me/us failing which the said authority may recover the amount from me/us through whatever means it deems proper.

(a) **Signature of applicant**

Date :

(b) **Signature/Left/Right hand thumb impression of the parents/guardian**

Place :

(c) **Full name in block letters :**(c) **Relationship with the student:****PART- II****CASTE CERTIFICATE**

I, certify to the best of my knowledge that Shri/Kumari/Shrimati(Name of the Student).....Son/daughter/wife of.....
(father/husband) is a permanent resident of village/town
 P.O..... Mauza.....
 P.S..... District..... belongs to the
 Caste..... Sub Caste.....
 which is recognised as Scheduled Caste under the Constitution of Scheduled Castes and Scheduled Tribes Order,1950 as amended by the Scheduled Castes and Scheduled Tribes Lists (Modification order)1976.

Place :

* **Signature of the issuing authority**.....

Date.....

Full name in Capital Letters.....

** Seal

Designation.....**Address in full**.....

- Stamped signature will not be accepted.
- Certificate not bearing the seal of issuing authority will not be accepted.

Note : (i) This certificate is to be obtained from the President, Assam Anusuchit Jati Parishad (district level) and duly counter signed by the Deputy Commissioner of the district or Sub-Divisional Officer (Civil) of the Sub-Division (where the parents/guardian of the applicant is permanently residing) .In case of certificate issued by concerned Hon'ble MP/MLA countersignature from DC/SDO(C) is not necessary.

(ii) This is a very important certificate as the scholarship is awarded mainly on the basis of this certificate only. The issuing authority is, therefore, requested to issue this certificate, with due care and caution.

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PART- III

INCOME CERTIFICATE

(To be obtained by concerned Deputy Commissioner/Sub-Divisional Officer (Civil)/Circle Officer/Mouzadar) [In case of employee to be obtained from the employer. In case of businessman Income Certificate to be obtained from the by Taxation Department]

Certified to the best of my knowledge that Shri/Shrimati.....
 Father/mother/guardian/husband of Shri/Kumari/Shrimati.....
 (name of the student) is a permanent resident of village/town.....P.O.....
 P.S..... District..... His/Her profession is
 and his/her total annual income from all sources) is Rs..... (Rupees
only.

.....
 Signature of the DC/SDO (C)/Circle
 Officer/Mouzadar/Employer/Income Tax Officer

Seal

Full name

Designation

Address

Countersigned by (as applicable) :

Full Name

Designation

Place & Date

PART- III A

DECLARATION OF INCOME

(To be furnished by either of the parents when they are alive or guardians when either of the parents are not alive. For married female applicant husband's declaration is required)

Whereas my son/daughter/dependent/wife Shri/Kumari/Shrimati
a student of(name of the institution) has applied
for grant of a scholarship. I, being the (father/mother/guardian/husband) of the applicant do hereby
solemnly affirm that my total annual income from all sources is Rs.....(Rupees.....
.....)only

I also affirm that particulars of property held by me are given under as per schedule which is true to
the best of my knowledge and belief. In the event of the particulars furnished in the declaration found
to be false, I shall refund the same accordingly as per the direction of the concerned authority .

I further declare that I am a permanent resident of the state of Assam; and belong to Caste/Sub Caste
..... which is recognised as Scheduled Caste in Assam.

Place.....

Signature /Thumb Impression

(Name in full)

Date.....

Relationship with the student.....

PROPERTY SCHEDULE

I. Extent of Land Held

- (i) Area..... (ii) Village..... (iii) Mouza.....
(iv) Dag No/Patta No..... (v) Land Revenue assessed.....

II. Property Held (House,shops,house sites,etc.)

- (i) Brief Description of the property.....
(ii) Location : Street..... Village/Town.....
(iii) Rent derived,if any.....
(iv) House Tax paid.....
(v) Nature of Business.....
(vi) Sale Tax/Income Tax paid.....
(vii) Trade Permit/Licence No.....

III Salary Drawn

- (i) Name of the Employer.....
- (ii) Office/Unit in which he/she (is) working with designation.....
- (iii) Monthly emoluments (including all deductions)
 - (a) Pay Band..... (b) Grade Pay.....(c) DA.....
 - (d) Other Allowances..... (e) Gross Pay.....
 - (f) **Net Pay:** (Rs Rupees.....only)

OTHERS

- (i) Income from Part Time occupation : Rs.....
- (ii) Amount drawn as wages : Rs.....
- (iii) Any other income : Rs.....

Place:
Date:

.....
Signature/Thumb Impression of father/mother
/guardian/husband as the case may be.

Name.....
Address.....
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PART IV

(To be filled in by the head of the institution where the applicant is studying)

- (i) The statement made by the applicant in Part –I are correct to the best of my knowledge.
Caste certificate has been checked.
- (ii) Character, conduct and attendance
of the applicant (general review)
- (iii) Whether regular pass or supplementary
or provisionally promoted.....
- (iv) If provisionally promoted,the name of
the back subject to be cleared.....
- (v) Whether the applicant is recommended
for the award of scholarship.(Yes/No).....
- (vi) Duration of the course in which the applicant is studying in your institution.....
- (vii) Whether Degree/Diploma, Certificate/Trade professional course.....
- (viii) Date of the commencement of the current
Academic session of the course.....
- (ix) Exact date on which the applicant joined
the course/class this year.....

(x) Likely date, month and year on which the annual examination the current session will be over (including practical subjects).....

(xi)(a) Is the applicant exempted from payment of tuition fees? Yes or No.....

(b) If yes, please indicate whether exemption is for half or full tuition fees.....

(xii) If the applicant is residing in an approved hostel, please indicate if he/she is entitled to free boarding/free lodging.....

(xiii) Exact date of admission in the hostel.....

(xiv) The name of the scheduled/nationalised Bank branch alongwith IFS Code No. and Account No. through which the payment of scholarship is to be made.

(xv) The designation and full address of the Head of the Institution to whom the scholarship amount in respect of the student maybe sent.....

(xvi) The student is required to pay the following fee which are not re-imbursed by the state govt. or from any other sources :

N.B: The Head of the Institution is to ensure that no other fee is charged except the fee as listed below:

Course..... Amount payable for the year Rs. Paise	Course..... Amount payable for the year Rs. Paise

(a) Enrolment or Registration fee

(b) (i) Tuition fee (ii) Science or Laboratory fee (if any) non-refundable portion

(c) Game fee (d) Union fee (e) Library fee (f) Common Room fee (g) Magazine fee

(h) Medical examination fee charged by the institution

(i) Examination fee charged by the Institution/University

(j) Total fee payable during academic session(both in figure & words).....

Certified that the institution is affiliated to the.....University/Board and is recognised by the Govt. of India/State Govt. of..... in the year of.....

Minimum qualification required for admission to the course is passed in the..... Examination.

Memo No:.....

Place & Date.....

Seal of the institution

Signature of the Head of the Institution

(Name in Block Letter):

Designation :

Address:

(Stamped signature will not be accepted)

PART V

(For use of the office of the Project Director ITDP)

I have gone through the particulars in details as furnished in Part I,II,III,IIIA and IV by all concerned and found them to be in order and therefore recommend the applicant for the award of scholarship.

Memo No.....

Date.....

Forwarded to the Directorate of Welfare of SC,Assam:

Signature of Project Director,ITDP

.....District

Place

Seal

(Full Name).....

PART VI

(For use of the Directorate of Welfare of SC,Assam only)

Approved/Rejected

Total amount sanctioned

Sanction No.& Date:

Jr. Asstt.

Post Matric Scholarship

Bill Assistant

Nodal Officer,Scholarship

Director,
Welfare of SC,Assam