

Transportation

Books 7 stationery

Others(specify)

LBW TRUST SCHOLARSHIPS

Vikash Educational Charitable Trust

Nurturing Excellence among Students
Application for Renewal of Scholarships for the Year 2019-20
(To be filled in by the student's and sent by 31st Oct 2019)



1.	Nam	e:			M/	'F			
	Mobi	ile No:							
2.	Name	e of the College:						Paste one red	cent
۷.	IValli	e of the conege	••••••••••	••••••	•••••	••••••		color passpoi	rt
	Cour	se:	Branch :	••••••				size photo	
	Name	e of the Principal:		•••••	Phone No :	••••	•••		
		-			ity Rgn.No./Roll No				
3.		•		•	ı full:Yes/No (ı	•			
4.	Fathe	er's Name:		Occu	ıpation:	Mob N	o		
5.	Mother's Name			Occupatio	Occupation: Mob No				
٥.							······		
6.	Broth	ners and Sisters In	formation:						
SI. N	No Name		Age	Occupation/Class of	Study	School/College			
				1.85					
		s family income po							
Nam	Name of organization Year			Amount Rs.		Remarks			
like r	name	and address, pho	ne No. of the Ba	ank, date of a 	application and prese	nt status of	•	•	
10. If	fsanc	tioned, give amou	unt:			•••••			
11.Es	stima	te of Expenses for	the Current Ac	ademic Year:					
Item	Items of expenses Es				stimated expenses Rs.		Expenses incurred till date Rs.		
Admission Fees				·					
Tutio	n Fee	es							
		Regn. Fees							
Hostel Fees(Seat Rent)									
Messing Exn									

Name and Address of the Bank:									
13. Address: (in capital letters) :									
13. Address: (in Capital letters) :									
Present Address	Permanent Address								
PIN:	PIN:								
Contact No:	Contact No:								
E-Mail Address:	E-Mail Address:								
(Applications of Diploma/Degree Engg. and MBBS student	s will not be considered without correct e-mail id)								
14 . Declaration by the Student : I hereby declare that the information given above in this application is true and correct to the best of my knowledge and belief. I also pledge that upon completion of my study I shall return the amount of assistance received through the Trust, within 5 years which will be used as similar assistance to other needy and meritorious students.									
Name of the Applicant Signature of Appl (in Capital letter)									
15. Declaration by the Parent/Guardian : I hereby declare true and correct. I promise to persuade my ward to return return the amount									
Name of Parent Signature of P (in capital letter)	arent Date								
16.Certificate by the College Authorities: Certified that Sri/Kumis a student of our college and is now studying in									
If he/she is getting any other assistance, please mention t	he source and amount.								
17. Any other comment.									
Signature (With college seal):									
Name:Designation	n:Date:Date:								
Important: Following documents must be attached; otherwise the application will be rejected. 1.Copies of Mark Sheets of all Semesters of Last Year. 2.Copies of Receipts of Tution Fees and Hostel Fees paid during the year.									

- 3.A letter addressed to the Donor, giving details of activities in the college during past 6 months in minimum 200 words
- 4. For final Year Students, the mark sheets, pass certificate with latest postal & E-mail address are to be sent after completion of their study.

Address for Communication:

VIKASH EDUCATIONAL CHARITABLE TRUST

1st Floor, 'ROSE DALE', Plot No. 139, District Centre, C.S.Pur- 751 016, Ph.0674-2747100 E-mail: vectrust@yahoo.com, Website: www.vikas.org.in