

SHRI BAJRANG POWER ISPAT LTD 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.	Name:M/F		
	Mobile No:	Paste one recent	
2.	Name of the College:	color passport size photo	
	Course:Branch :	size photo	
	Name of the Principal:Phone No :		
	Year Semester: University Rgn.No./Roll No		

- 3. Whether passed all subjects during the last year in full:.....Yes/No (tick one) If No, explain in detail:.....
- 4. Father's Name:..... Mob No...... Mob No.....
- 5. Mother's Name:..... Mob No...... Occupation:.....

6. Brothers and Sisters Information:

Sl. No	Name	Age	Occupation/Class of Study	School/College

7. Gross family income per annum:.....

8. Scholarships/Financial assistance received till date:

Name of organization	Year	Amount Rs.	Remarks

9. Have you applied for study loan to any Bank ?..... If yes, then give details like name and address, phone No. of the Bank, date of application and present status of your application.

10. If sanctioned, give amount:.....

11. Estimate of Expenses for the Current Academic Year:

Items of expenses	Estimated expenses Rs.	Expenses incurred till date Rs.
Admission Fees		
Tution Fees		
University Regn. Fees		
Hostel Fees(Seat Rent)		
Messing Exp		
Transportation		
Books 7 stationery		
Others(specify)		

12. Bank Account No :....

Name and Address of the Bank:.....

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 students 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 (in Capital letter)	Signature of Applicant	Date
-	Guardian : I hereby declare that the information ersuade my ward to return the assistance in tim	
Name of Parent (in capital letter)	Signature of Parent	Date
our college and is now studying	uthorities: Certified that Sri/Kum g in ssistance, please mention the source and amou	
17. Any other comment.		
Signature (With college seal):		
Name:	Designation:	Date:
1.Copies of Mark Sheets of 2.Copies of Receipts of Tution	nents must be attached; otherwise the app all Semesters of Last Year. on Fees and Hostel Fees paid during the ye	ear.

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*