



VIKASH EDUCATIONAL CHARITABLE TRUST

Academic Year: 2026-2027 (Fresh)

SEEDS, LBW, WFC, S.B TRUST, M/S M.G MOHANTY, VEDANTA, SBPIL, S.M.C TRUST

Combined Application for financial assistance

Last date for submission of application- 30.11.2026

Only students pursuing Govt. recognized courses in recognized institutes should apply.

Photograph

Guidelines: -

1. Please download the form from **Website: www.vikas.org.in** and fill up the form yourself carefully.
2. (Tick the correct option where options have been given in the box). Leave no column blank.

I. College / School Information: - (IN CAPITAL LETTERS)

Name of College/School		Type	GOVT.	PVT.
		Email		
Address		Name of Course		
Year of Study		Duration of course		
Basis of seat allotment		Year of joining		
Annual course fees		Amount Paid		

II. Student's Personal Information: - (IN CAPITAL LETTERS)

Name						D.O. B			
Gender	MALE	FEMALE		Community	GEN	SC	ST	OTH	
Mobile				Aadhaar Number					
Address	AT: -			Email					
	P.O: -			District					
	P.S: -			Block		PIN			

III. Family Details: - (IN CAPITAL LETTERS)

Relation	Name	Age	Occupation	Education	Annual income
Father					
Mother					
Brother					
Sister					

IV. Past Educational Details :-(IN CAPITAL LETTERS)

CLASS	Name of the school/college	Govt./Pvt.	Year of passing	School fees paid	Percentage of marks secured
10 th					
+2					
+3					
Diploma					
B.Tech/MBBS					
others					

V. Earlier Financial Support Received from Any Source:-(IN CAPITAL LETTERS)

Period	Source	Amount in Rs.
During School Up to 10 th		
During +2		
During UG (+3)		

VI. PERSONAL ESSAY: -Describe in Odia /English about your family's financial condition in detail and why you need this assistance. (On a page 4 in separate sheet)

VII. Name, position and address of 2 persons of standing (not related to you) of your locality, who know your family well for getting information about you and your family.

1.	NAME	
ADDRESS-		
PIN CODE		
MOBILE No		

2.	NAME	
ADDRESS-		
PIN CODE		
MOBILE No		

VIII. Declaration by the student:

I hereby declare that the information given above in this application are true and correct to the best of my knowledge. If at any stage it is found that I have provided any false information or I am not sincere in my studies, then my financial assistance will be discontinued and I will refund the amount received by me immediately.

Further, I solemnly promise that upon completion of my study, I shall return all the amounts of assistance without interest received through the Trust within 5 years of my completion of the course for use as similar assistance to other poor and meritorious students.

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(Signature of Applicant)

Place: -

Date: -

IX. Undertaking by the father/ mother

I hereby confirm that the information furnished by my ward are correct. I shall persuade my ward to return the assistance within 5 years of his/her completion of the course for use as similar assistance to other needy student. If he/she fails, I shall return the amount.

(Signature of Father)

Date: -

(Signature of Mother)

Date: -

X. Certificate by College/School Authority: -

Certified that is studying in class of our college. He/she gets/ doesn't get other assistance. He/she deserves financial assistance for completion of the course.

(Signature of Principal with College Seal)

Name: -

Designation: -

College phone no:

Date:

XI. Documents Required (Tick mark copies actually attached): -

1. Copy of Admission/Allotment letter.
2. Copy of Rank card (JEE/ CET/ DET/ AIEEE/ NEET).
3. Copy of Aadhaar Card of the student.
4. Copy of Income Certificate from Revenue Officer.
5. Copy of Caste Certificate.
6. Copy of BPL/Ration Card.
7. Copy of the receipt of amounts deposited in the college
8. Copy of First page of bank passbook of applicant.
9. Copies of 2 Passport size photo.
10. Copy of mark sheets of all passed examinations.
11. Write up about your family's financial condition.

Note:-Please send completed application form in hard copy duly signed by parents and College Principal to Vikash Educational Charitable Trust, Rose Dale, 139 District Center, Chandrasekharpur, and Bhubaneswar 751016.

➤ For office use only:(Not to be filled by the applicant)

Address for Communication

VIKASH EDUCATIONAL CHARITABLE TRUST

Rose Dale, 139, District center, Chandrasekharpur, Bhubaneswar-751016

E-mail: vectrust@yahoo.com, Website: www.vikas.org.in

Space for writing Essay

