



LBW Trust Scholarships

Nurturing Excellence among Students

Application for **Renewal** of Scholarships for the Year 2020-21

(To be filled in by the student's and sent by **30st Nov. 2020**)



1. Name:.....M/F.....

Mobile No:.....

2. Name of the College:

Course:.....Branch :

Name of the Principal:.....Phone No :

Year..... Semester:..... University Rgn.No./Roll No.....

Paste one recent color passport size photo

3. Whether passed all subjects during the last year in full:.....Yes/No (tick one)

If No, explain in detail:.....

4. Father's Name:.....Occupation:..... Mob No.....

5. Mother's Name:.....Occupation:..... Mob No.....

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		
Tuition Fees		
University Regn. Fees		
Hostel Fees(Seat Rent)		
Messing Exp		
Transportation		
Books 7 stationery		
Others(specify)		

12. Bank Account No :..... IFSC code.....

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
-------------------------------------------------------	---------------------------------	---------------

Aadhar card no. of student:

15. Undertaking by the father : *I hereby declare that the information given by my Son/Daughter/Ward is true and correct. I promise to persuade my ward to return the assistance in time. If he / she fails to return, I will return the amount*

..... Name of father (in capital letter) Signature of father Date
------------------------------------------------	------------------------------	---------------

Aadhar card no. of father :

16.Certificate by the College Authorities: Certified that Sri/Kum.....is a student of our college and is now studying in
If he/she is getting any other assistance, please mention the source and amount.

17. Any other comment.

Signature (With college seal):

Name:.....Designation:.....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.**
- 5. If father is deceased , mother’s undertaking :**

If Father is deceased Mother may undertake to repay the amount.

Address for Communication:

VIKASH EDUCATIONAL CHARITABLE TRUST
 'ROSE DALE', 139, District Center, Chandrasekharapur, Bhubaneswar-751016
 Ph-0674-2747100(O) E-mail:vectrust@yahoo.com,
 Website: www.vikas.org.in

