

SHRI DURGIANA COMMITTEE SCHOLARSHIPS (SDCS)
Merit-cum-means Scholarship for Fatherless Students
(ESSENTIAL INFORMATION IN BRIEF (No column to be left BLANK))

Name : _____

Father's Name : _____

Address of correspondence : _____
 _____ **Tehsil** _____ **District** _____
 _____ **PINCODE** _____

Date of Birth : ____/____/____ **Email ID** _____

Phone No. : **(Mobile)** _____ **(Resi.)** _____

Parents Profession : _____ **Annual Family Income** _____
(From all sources)

Course of study : _____ **Current Sem./Year** _____

Name & address of College : _____

Name of University : _____

Marks obtained in previous three examinations:

Class	Year of passing	Marks & Percentage	Position in class
1.			
2.			
3.			

Fees for the Academic Year : Tuition Fee _____ Other Fees _____ Hostel Fees _____
(2 Semesters) in which studying

If you have received any financial assistance during last year, Give :

Source of assistance	Duration / Year	Amount Received

Brothers/Sisters (living with parents) Details:

Name	Age	Class/course of study	Tuition Fee	If working (profession & Income)
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

***Fatherless, merit-cum-means Students.**
For students above +2 level.

INCOMPLETE APPLICATION WILL BE REJECTED

Paste passport size photograph (Do not staple) The candidate should write his/her name and sign across the photograph

1. Full Name (in Capital Letters)_____
 2. Date of Birth (DD/MM/YYYY ____/____/_____) 3.Religion_____
 4. Mobile No._____ Landline (with STD code)_____
 5. Valid Email-ID_____
 6. Permanent Residential Address (in Capital Letters)
(Mentioning Tehsil, District & PIN No. clearly)_____
- _____
- _____
- District_____ Tehsil_____
- State_____ Pin Code_____

7. Family Partaiculars:

(A) Parents		Father/Late Shri	Mother
(i) Name			
(ii) Education/Technical qualification			
(iii)Occupation/Profession			
(iv)Annual Gross Family Income			
(B) Brothers/Sisters living with Parents			
Name	Age	Class/course of study Tuition fee	If working (Profession & Income)
1. _____		_____	_____
2. _____		_____	_____
3. _____		_____	_____
Sisters			
Name	Age	Class/course of study Tuition fee	If working (Profession & Income)
1. _____		_____	_____
2. _____		_____	_____
3. _____		_____	_____

8. Particulars of Examinations passed (attach copies of certificates):

Exam	Month/Year (MM/YYYY)	Total marks	Marks obtained	Percentage	Details of the School		Medium (Hindi/English /Punjabi)
					Name address	Govt./Aided/ Unaided/Pvt	

9. Planned Programme of Studies:

Students pursuing professional Diploma/Degree/Post Graduate courses in Universities/affiliated colleges; Institute of National importance or Deemed Universities are eligible for Scholarship. **Correspondence courses are not eligible/private students are also not eligible.**

Course for which scholarship is Requested	Duration	Date/Month/Year admission	Details of the College /University		Year/Semester in which studying at present
			Name & address	Govt./Aided/ Unaided/Private	

10. Academic Record of last four semesters or two years (wherever applicable):

Year	Semester/Year	Maximum no. of marks	Marks obtained	Percentage	Month & Year of Exam	Subject(s) in which you are still to reappear, if any

11. Achievements, Interests & Hobbies:

Any other Scholarship/Medal awarded to you	Medal/Certificate of Merit in sports/athletics/other	Hobbies
--	--	---------

12. Were you ever rusticated/fined/debarred from appearing in any examinations in any year? If Yes, give details:

13. Justification for grant of scholarship:

State in no less than 150 words (a) What is your goal in life? (b) Why do you need this scholarship? If required, attach a sheet of paper to answer these two questions. Please write your **Roll Number, Full Name, Signature and Date** on additional sheet also.

14. A) Did you receive or do you expect to receive any Financial Assistance from any other source for the course for which SDCS scholarship is requested.

B) Give particulars including the amount and duration of such assistance:

Name of the source from which assistance received/expected	Duration Month, Year to Month, Year	Total amount

15. References : Give name, address, phone number and e-mail address (if available) of two persons (not close relatives) who know you well and can provide information about you:

i) _____

ii) _____

16. Family Occupation and Assets:

(i) Mention the main occupation of your family (for both mother and late father):

Occupation	Father	Mother	Income proof to be submitted with Application Form
Businessman			Copy of latest ITR (if filed) or income proof as per FORMAT – A
Farmer (having own land)			Income Certificate from Village Sarpanch / Tehsildar as per FORMAT-B
Labourer Private workers/Daily Wagers			Income certificate as per FORMAT-C
Employee			Copy of latest ITR (if filed) or income proof as per FORMAT-D
Pensioner			Proof of receiving pension as per FORMAT-E

(ii) Please tick the assets owned by your family (If more than one, give number):

House _____ Car _____ Motorcycle/scooter _____ Television set _____

House for Rent _____ Shop _____ Any other (Please specify) _____

(iii) Tick mark the Agriculture Assets owned by your family:

Agriculture Land _____ : (If so, state the number of acres owned _____)

Livestock _____ : (If yes, Give number of cows _____ Buffaloes _____ Others _____)

17. Declaration/Undertaking by the Applicant (Duly supported by mother/guardian):

- (i) I hereby declare and affirm that the information given above is correct, and no material information has been withheld/concealed. I will also maintain my e-mail account to be able to remain in touch with SDCS and others.
- (ii) I clearly understand that higher education is the best tool to empower our youth to lead a life of dignity and honour, but many of them, like me, cannot afford the tuition and other college expenses unless helped with scholarships. I hereby commit myself on oath that, in response to the scholarship help given to me, I will regularly contribute my services/time and part of earnings, to support our youth to get access to higher education. This Sewa is my creative social responsibility as well as my moral duty and I will never shirk.
- (iii) I do hereby give my unconditional consent for disclosure of information related to me to any communication channel, by the SDC, Amritsar.

- (iv) I understand that giving any false information in the application and attachments may result in termination of scholarship and SDC reserves the right to recover the scholarship amount already dispersed.
- (v) I will attend all Guidance and Counselling Activities/Programs/Workshops organized for SDC scholarships, to which I am invited.
- (vi) I do accept all the rules and regulations of the SDC scholarship program as applicable from time to time.

Signature of Mother/Guardian

Signature of Applicant

Name:

Name:

Date:

Date:

18. Please tick appropriate box with () or (X) and / or fill-in relevant information in the space provided for the following check-list points (Also attached the documents in the same sequence):

S.No.	Check list Point	Yes ()	No (X)	Reason for No (X)
1.	Photographs pasted / attached			
2.	Duty filled & signed application form along with valid and working Mobile number and E-mail ID			
3.	Duly filled and signed Report from College/Institute Authorities (i.e. Page No. 6-7)			
4.	Attested photocopy of Mark sheet for class X			
5.	Attested photocopy of Mark sheet for class XII			
6.	Attested Gazette/photocopy of DMC for Examinations passed during session academic/professional course			
7.	Photocopies of fees receipts paid for the period from _____ (for new admission)			
8.	Original Annual Income Proof			

SDC SCHOLARSHIPS : 2016

REPORT FROM COLLEGE/UNIVERSITY AUTHORITIES
(INCOMPLETE FORMS WILL BE SUMMARILY REJECTED)

Part A

(To be filled-in by the student in her/his own handwriting):

If you have got scholarship in Previous year/s, then give your Roll Number _____

Name of the student : _____

Father's Name : _____

Residential Address : _____

District _____ Tehsil _____

Email ID : _____ Mobile No. _____

Bank A/c No.of student: _____

Brothers/Sisters Living with Parents:

Brothers

Name	Age	Class/course of study	Tuition fee	If working (Profession & Income)
1. _____				_____
2. _____				_____
3. _____				_____

Sisters

Name	Age	Class/course of study	Tuition fee	If working (Profession & Income)
1. _____				_____
2. _____				_____
3. _____				_____

Paste passport photograph (Do not staple). The candidate should write his/her name and sign across the photograph

Part B (To be filled by the School/College Authorities):

Name & address of the school/college/institute	
Name of the University	
Name & Phone No. of the Principal/Head of Department	
Email address of the Principal/Head of Department	
Fee concession, if any, by College and Amount	
Family's annual income as per College/Institute Records	
Receiving financial aid/scholarship from any other Organization?	
If yes, name of Organization and the amount for the academic year	

Student's Details:

College/Institute Roll Number	Course of Study	Year of admission	Duration of the course/No. of semesters/years	Year/Semester in which studying at present	Attendance during the period under report %	Conduct (Satisfactory/ Not satisfactory)

Previous Years' / Semesters' Academic Record of Student, if applicable

Year	Two most recent semesters or one year	Maximum Marks	Marks obtained	Percentage	Month & Year of Examination	Subject(s) in which required to reappear

Details of Fee paid to the School/College/Institute

Sr.No.	Item	Fees for the Academic Year (2 Semesters) in which studying (attach receipts)		Fees paid during the previous academic year (2 Semesters) if applicable (attach receipts)	
		Fee Amount	Receipt No. & Date	Fee Amount	Receipt No & Date
1.	Tuition Fee				
2.	Total Non-Refundable Charges e.g. Development Fee, Library Fee, Students Activity Fee, University related Fee, Exam Fee etc.				
3.	Refundable Charges				
4.	Hostel Charges				
5.	Total				

Fatherless means-cum-Meritorious Students

(Provide Position in Session/Class, if any, and also Division but not Ist, 2nd, or 3rd Division)

Certified that the above student, who passed last _____ semester/year of the course in our college, secured _____ position in _____ (Division) in a class of _____ students (no. of students).

Certified that the above information in respect of _____
 (Roll No. _____) S/o, D/o _____ is as per official record of the College/Institute and has been provided to facilitate grant of scholarship to the student.

Date _____

(Principal / Head of Department)

Place _____

(Stamp of College/Institute)

SHRI DURGIANA COMMITTEE SCHOLARSHIPS (SDCS)
Merit-cum-means Scholarship for Fatherless Students
(ESSENTIAL INFORMATION IN BRIEF (No column to be left BLANK))

Name : _____

Father's Name : _____

Address of correspondence : _____
 _____ **Tehsil** _____ **District** _____
 _____ **PINCODE** _____

Date of Birth : ____/____/____ **Email ID** _____

Phone No. : **(Mobile)** _____ **(Resi.)** _____

Parents Profession : _____ **Annual Family Income** _____
 (From all sources)

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1.			
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in which studying

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2. _____	_____	_____	_____	_____
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Paste passport size photograph (Do not staple) The candidate should write his/her name and sign across the photograph

1. Full Name (in Capital Letters)_____
 2. Date of Birth (DD/MM/YYYY ____/____/_____) 3.Religion_____
 4. Mobile No._____ Landline (with STD code)_____
 5. Valid Email-ID_____
 6. Permanent Residential Address (in Capital Letters)
(Mentioning Tehsil, District & PIN No. clearly)_____
- _____
- _____
- District_____ Tehsil_____
- State_____ Pin Code_____

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(i) Name			
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(iii)Occupation/Profession			
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Name	Age	Class/course of study Tuition fee	If working (Profession & Income)
1. _____	_____	_____	_____
2. _____	_____	_____	_____
Sisters			
Name	Age	Class/course of study Tuition fee	If working (Profession & Income)
1. _____	_____	_____	_____
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11. Achievements, Interests & Hobbies:

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i) _____

ii) _____

16. Family Occupation

Relationship	Occupation	Annual income	Income proof to be submitted with Application Form
			Copy of latest ITR (if filed) or income proof as per FORMAT – A

17. Declaration/Undertaking by the Applicant (Duly supported by mother/guardian):

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Signature of Mother/Guardian

Name:

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Signature of Applicant

Name:

Date:

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SDC SCHOLARSHIPS : 2016

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Name of the student : _____

Father's Name : _____

Residential Address : _____

District _____ Tehsil _____

Email ID : _____ Mobile No. _____

Bank A/c No.of student: _____

Brothers/Sisters Living with Parents:

Brothers

Name	Age	Class/course of study	Tuition fee	If working (Profession & Income)
1. _____				_____
2. _____				_____
3. _____				_____

Sisters

Name	Age	Class/course of study	Tuition fee	If working (Profession & Income)
1. _____				_____
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Name of the University	
Name & Phone No. of the Principal/Head of Department	
Email address of the Principal/Head of Department	
Fee concession, if any, by College and Amount	
Family's annual income as per College/Institute Records	
Receiving financial aid/scholarship from any other Organization?	
If yes, name of Organization and the amount for the academic year	

Student's Details:

College/Institute Roll Number	Course of Study	Year of admission	Duration of the course/No. of semesters/years	Year/Semester in which studying at present	Attendance during the period under report %	Conduct (Satisfactory/ Not satisfactory)

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4.	Hostel Charges				
5.	Total				

Merit-cum-means Scholarship for Fatherless Students

(Provide Position in Session/Class, if any, and also Division but not 1st, 2nd, or 3rd Division)

Certified that the above student, who passed last _____ semester/year of the course in our college, secured _____ position in _____ (Division) in a class of _____ students (no. of students).

Certified that the above information in respect of _____
 (Roll No. _____) S/o, D/o _____ is as per official record of the College/Institute and has been provided to facilitate grant of scholarship to the student.

Date _____

(Principal / Head of Department)

Place _____

(Stamp of College/Institute)