

# **RENEWAL OF SHDF SCHOLARSHIPS 2016 (FOR OLD APPLICANTS)**

## **SIKH HUMAN DEVELOPMENT FOUNDATION, USA**

In association with

## **NISHKAM SIKH WELFARE COUNCIL (REGD.)**

**NISHKAM BHAWAN, B-BLOCK, TILAK VIHAR, TILAK NAGAR, NEW DELHI – 110018**

**Ph. No. 011-28333842/011-28333377, Email-ID: nishkamsewa1984@gmail.com Website: www.nishkam.org**

## **GUIDELINES FOR RENEWAL OF SHDF SCHOLARSHIPS (2016)**

### **Procedures**

For renewal of SHDF Scholarships 2016, the students are required to submit duly filled in College Report (Format for the same is attached herewith) along with latest Original Income Proof, Photocopy of DMC or attested copy of gazette of last semesters/year and photocopies of fee receipts for the last year **LATEST BY 14<sup>TH</sup> AUGUST 2016.**

It may also be noted that each student eligible for Renewal of Scholarship and going to complete his/her professional course during current year or next year will have to attend at least one Seminar / Workshop during the year for his/her improvement of Communication skills, Personality Development, Moral Science, Human Values and Career Guidance.

Candidates will be required to appear for Interview. This interview shall be based on the subject matter contained in the recommended book “Naitik Sikhya” (prescribed by Guru Gobind Singh Study Circle, Ludhiana), general knowledge and subject knowledge.

The Interview shall be conducted at Amritsar, Ludhiana, Chandigarh, Faridkot, Moga and New Delhi at the date and time to be intimated later through e-mail or Nishkam’s website www.nishkam.org

***PLEASE READ THE FOLLOWING INSTRUCTIONS / GUIDELINES BEFORE ATTEMPTING TO FILL THE COLLEGE REPORT***

### **Regarding College Report:**

1. Fill the College Report clearly and completely in English in BLOCK LETTERS.
2. Please fill in all the columns and **DO NOT PUT DOTS / DASHES AND DO NOT LEAVE ANY COLUMN BLANK.**
3. **INCOMPLETE COLLEGE REPORT WILL BE SUMMARILY REJECTED** and no further correspondence will be entertained.
4. College Report should be **SIGNED WITH DATE AND COLLEGE STAMP/SEAL** by the head of the college / institute.

### **Required enclosures / supporting documents:**

With the duly FILLED-IN and SIGNED College Report, attach the following documents: -

1. 3 copies of a good quality colored passport size recent photographs (paste TWO photographs at appropriate places in the Application Form and attach ONE with your name on the backside of it in an envelope).
2. **DMC/ attested Gazette** of last 2 Semesters’ or 1 year of college education Examinations along with **fees receipts** for the same period. No handwritten Receipts will be accepted.

*(Please do not attach this page with Application Form)*

**3. Proof of family income (both parents):-** The Affidavit/Certificate is to be prepared on Stamp Paper (wherever applicable) as per the SAMPLE FORMAT provided:

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

### **Important Instructions:**

- 1 Duly filled-in College Report with all Enclosures as stated above should be sent to **“Nishkam Sikh Welfare Council (Regd.),Nishkam Bhawan, B-Block, Tilak Vihar, Tilak Nagar, New Delhi-110018”** by speed/registered post or courier marking, **“SHDF Scholarships-2016”** on the top of the envelope containing the Report **and must reach Nishkam Office by 14<sup>th</sup> August 2016 (1700 Hrs.)**. **College Report received after the last date will be summarily rejected.**
- 2 Please always state your **SHDF Roll No.** and **Contact Number** while communicating with Nishkam and also inform immediately any change in your postal address or e-mail ID or phone number
- 3 Please give **TRUE & CORRECT** information as Nishkam Volunteers may cross check the information submitted. Giving **false information** or suppression of any fact will result in **termination of scholarship**, if already granted besides other legal action will be initiated. **STUDENTS BELONGING TO ONLY NEEDY FAMILIES SHOULD APPLY.**
- 4 If the applicant has **received financial assistance** (either on account of SC/ ST/ OBC/ Any other category OR from any other source) during the previous year, full **information must be provided** at the appropriate place in the College Report.
- 5 Management reserves the right to reject any application without assigning any reason. Decision of management for scholarships shall be final and binding. **No correspondence will be entertained in this regard.**

**Last Date for Receipt of College Report is August 14, 2016.**

*(Please do not attach this page with Application Form)*

**FORMAT "A"**  
**(For Self owned business/shop/self employed etc.)**

**This declaration of income statement must be printed on a Stamp Paper duly attested by  
Notary/Magistrate/Revenue Authority  
Affidavit on Stamp Paper is to be sent with the Application Form**

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AFFIDAVIT

I, \_\_\_\_\_ son/wife of \_\_\_\_\_ resident of \_\_\_\_\_

\_\_\_\_\_ and father/mother of \_\_\_\_\_ (Name of Applicant), who is studying in \_\_\_\_\_

do hereby solemnly affirm and truthfully give the following details that:-

1. I am a self employed person and running the business of \_\_\_\_\_
2. The name of my business/shop is \_\_\_\_\_
3. The address of my business/shop is \_\_\_\_\_
4. The business/shop location is owned by \_\_\_\_\_
5. I deal in the following main commodities \_\_\_\_\_
6. My total annual income from this business/shop is Rs. \_\_\_\_\_
7. I have \_\_\_\_\_ number of hired workers.
8. My PAN No./Sales Tax No. is \_\_\_\_\_
9. I am paying /not paying Income Tax \_\_\_\_\_  
(if paying attach copy of IT Return.)

I hereby declare and affirm that I have knowingly and willfully stated the above facts and the information given is true and correct to the best of my knowledge and belief. I also understand that if the above facts and figures are found to be false at any stage, then any financial benefit given to my son/daughter under the scheme of 'SHDF Scholarships' could be withdrawn and legal action, as deemed fit, may be initiated against me or my ward.

Date \_\_\_\_\_

DEPONENT

Verification:

Verified that the contents of this Affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date \_\_\_\_\_

DEPONENT

(Send any one Format (from Format-A to E) which is linked with you with Application Form)

**FORMAT "B"**  
**(For Farmers/Agriculturists having own land)**

**This declaration of income statement must be printed on a Stamp Paper bearing all details as required below and  
duly attested by Notary/Magistrate/Revenue Authority**

**Or**

**Self declaration duly attested by Village Sarpanch/Tehsildar**

**Affidavit on Stamp Paper OR Self declaration (whichever is applicable) is to be sent with the Application Form**

AFFIDAVIT

I, \_\_\_\_\_ son/wife of \_\_\_\_\_ resident of \_\_\_\_\_

\_\_\_\_\_ and father/mother of \_\_\_\_\_ (Name of Applicant), who is studying in \_\_\_\_\_

do hereby solemnly affirm and truthfully give the following details that:-

1. I own \_\_\_\_\_ (land size) \_\_\_\_\_ of agricultural land.
2. I have given on lease/rent \_\_\_\_\_ (land size) \_\_\_\_\_ of agricultural land.
3. My agricultural land is situated at (complete address of where land is situated) \_\_\_\_\_  
\_\_\_\_\_
4. I cultivate \_\_\_\_\_ (names of crop cultivated) \_\_\_\_\_ crops on this land.
5. My irrigation resource is \_\_\_\_\_ Own Tube well/Canal/any other source \_\_\_\_\_
6. I have \_\_\_\_\_ nos. of Cows/buffalos and income from selling milk is \_\_\_\_\_
7. My annual income from the sale of the crop and milk is Rs. \_\_\_\_\_
8. I have \_\_\_\_\_ number of hired workers working on my land.

I hereby declare and affirm that I have knowingly and willfully stated the above facts and the information given is true and correct to the best of my knowledge and belief. I also understand that if the above facts and figures are found to be false at any stage, then any financial benefit given to my son/daughter under the scheme of 'SHDF Scholarships' could be withdrawn and legal action, as deemed fit, may be initiated against me or my ward.

Date \_\_\_\_\_

DEPONENT

Verification:

Verified that the contents of this Affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date \_\_\_\_\_

DEPONENT

*(Send any one Format (from Format-A to E) which is linked with you with Application Form)*

**FORMAT "C"**  
**(For Labourers/Private Workers/Daily Wagers)**

**This declaration of income statement must be printed on a Stamp Paper bearing all details as required below and  
duly attested by Notary/Magistrate/Revenue Authority  
Affidavit on Stamp Paper is to be sent with the Application Form**

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AFFIDAVIT

I, \_\_\_\_\_ son/wife of \_\_\_\_\_ resident of \_\_\_\_\_

\_\_\_\_\_ and father/mother of \_\_\_\_\_ (Name of Applicant), who is studying in \_\_\_\_\_

do hereby solemnly affirm and truthfully give the following details that:-

1. I work as a labourer/ private worker OR \_\_\_\_\_.
2. My nature of work is *(Describe it)* \_\_\_\_\_  
\_\_\_\_\_
3. My monthly Income as Labourer/Private Worker/ \_\_\_\_\_ is Rs. \_\_\_\_\_
4. I have my own house. \_\_\_\_\_ YES / NO \_\_\_\_\_

I hereby declare and affirm that I have knowingly and willfully stated the above facts and the information given is true and correct to the best of my knowledge and belief. I also understand that if the above facts and figures are found to be false at any stage, then any financial benefit given to my son/daughter under the scheme of 'SHDF Scholarships' could be withdrawn and legal action, as deemed fit, may be initiated against me or my ward.

Date \_\_\_\_\_

DEPONENT

Verification:

Verified that the contents of this Affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therein.

Date \_\_\_\_\_

DEPONENT

*(Send any one Format (from Format-A to E) which is linked with you with Application Form)*

**FORMAT "D"**

**(For Employee/Pensioners etc)**

**This declaration of income statement must be printed on a Letter head of the company and duly attested by Employer (in case of employee )  
Declaration is to be sent with the Application Form**

It is hereby certified that Sh./Smt. \_\_\_\_\_ son / Wife of \_\_\_\_\_ is an employee of our Company / Organization since \_\_\_\_\_ in the position of \_\_\_\_\_ and drawing a monthly salary of Rs. \_\_\_\_\_. His/Her monthly Salary Slip is Attached.

\_\_\_\_\_  
(Signature, Designation & Seal of the issuing authority)

Date \_\_\_\_\_

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**FORMAT "E"**  
**(For Pensioners etc)**

**This declaration of income statement must be printed on a Letter head of Bank where you are receiving pension and duly attested by Bank Manager  
Declaration is to be sent with the Application Form**

It is hereby certified that Sh./Smt. \_\_\_\_\_ son / Wife of \_\_\_\_\_ is a Pensioner and he/she is getting Rs \_\_\_\_\_ per month as a pension in our Bank. Copy of his /her bank passbook is attached herewith.

\_\_\_\_\_  
(Signature, Designation & Seal of the issuing authority)

Date \_\_\_\_\_

*(Send any one Format (from Format-A to E) which is linked with you with Application Form)*

# APPLICATION FORM FOR RENEWAL OF SHDF SCHOLARSHIPS 2016

(For old applicants)

To be submitted to

**NISHKAM SIKH WELFARE COUNCIL (REGD.)**  
**SHDF DIVISION**

Nishkam Bhawan, B-Block, Tilak Vihar, Tilak Nagar, New Delhi-110018

Tel. : 2833-3842/6677/5577/4477/3377, Website: [www.nishkam.org](http://www.nishkam.org)

*STUDENTS BELONGING TO ONLY NEEDY FAMILIES SHOULD APPLY.*

Paste passport size photograph (**do not staple**) The candidate should write his/her name & sign across the photograph

Roll No. of SHDF

1. Full Name (in Capital Letters) \_\_\_\_\_
2. Date of Birth(DD/MM/YYYY)\_\_\_\_/\_\_\_\_/\_\_\_\_ 3.Religion \_\_\_\_\_ 4. Contact No.(s) \_\_\_\_\_
5. Valid Email-ID \_\_\_\_\_
6. Permanent Residential Address(in Capital Letters): \_\_\_\_\_

District \_\_\_\_\_ Tehsil \_\_\_\_\_ State \_\_\_\_\_ Pin Code \_\_\_\_\_

## 7. Family Particulars:

(A) <u>Parents</u>	Father	Mother
(i) Name		
(ii) Occupation/Profession		
(iii) Annual Gross Family Income (Please provide proof)		

  

(B) <u>Brothers/Sisters living with Parents:</u>	Name	Relation (Brother/Sister)	Age	Class/Course of study	Tuition fee (attach proof) (Annual)	If working (Profession and Income)
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____

8. Course of study : \_\_\_\_\_ Current Sem / Year \_\_\_\_\_
9. Total Fees of one Academic Year: Tuition Fees \_\_\_\_\_, Other fees \_\_\_\_\_, Hostel Fees \_\_\_\_\_, Total fees \_\_\_\_\_
10. Name & University of College : \_\_\_\_\_

11. Did you receive or do you expect to receive any Financial Assistance from any other source for the course for which SHDF scholarship is requested ? (Yes/No)

If yes, please provide the following details :

Name of the Source from which Assistance received/expected.	Duration Month, Year to Month, Year	Total Amount

## 12. Checklist

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.	3 Photographs pasted / attached			
3.	Duly filled and signed Report from College Authorities along with valid and working Mobile Number and E-mail ID.			
4.	Attested Gazette / photocopy of DMC for Examinations passed during Apr. 2015 – Mar. 2016 of professional course.			
5.	Self attested Photocopies of fees receipts paid for the period from Jun. 2015-May 2016 (from Jun.2016 onwards for New admission)			
6.	Latest, Original Annual Income Proof.			

\_\_\_\_\_  
**Signature of Father/Mother/Guardian**

**Name:**

**Date:**

\_\_\_\_\_  
**Signature of Applicant**

**Name:**

**Date:**



SHDF SCHOLARSHIPS: 2016 (for old applicants)  
**REPORT FROM COLLEGE AUTHORITIES**

Paste passport size photograph (**do not staple**) The candidate should write his/her name & sign across the photograph

Name of the student: \_\_\_\_\_ S/o, D/o \_\_\_\_\_

Address : \_\_\_\_\_

Phone No(s). \_\_\_\_\_ Email-Id \_\_\_\_\_

Name & address of the College/Institute		Name of the University	
Name of the Principal/Head of Department		Phone No. & Email address of the Principal/Head of Department	
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 no.	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,**

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

**Details of Fee chargeable by the College and paid to the College/Institute (Please provide proof)**

S. No.	Item	Total Fees for the Academic year ( 2 Semesters) in which studying	Concession given (if any)	Actual Fees paid		Balance Fees (to be paid)
				Amount	Receipt No. & Date	
1.	Tuition Fee					
2.	Total Non- Refundable Charges e.g. Development Fee, Exam Fee etc.					
3.	Refundable Charges					
4.	Hostel Charges					
5.	Total					

**(If Meritorious student, give 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> Position in Class)**

Certified that the above student, who passed last \_\_\_\_\_ semester/year of the course in our college, secured \_\_\_\_\_ position (not Division) in a class 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 \_\_\_\_\_

Place \_\_\_\_\_

(Principal/ Head of Department)  
(Stamp of College/Institute)