Government of Karnataka

DIRECTORATE OF MINORITIES

20th Floor, V.V.Towers, Dr. B.R. Ambedkar Veedhi, Bangalore 560001. (080-22863617/18)

POST-MATRIC SCHOLARSHIP 2013-14 FRESH & RENEWAL

(Government of Karnataka)

For Students belonging to the Minority Community of Jains only.

Applications are invited from the students belonging to the minority communities pursuing Class XI / XII (PUC), Vocational Courses in I.T.I/I.T.C., JOC, Diploma - Technical & Paramedical, D.Ed, D.Pharma, GNM, Graduation - B.A, B.Com, B.Sc, B.B.M, B.C.A, BSW, B.Ed, B.P.Ed, B.LibSc, BTA, etc., Post-Graduation - M.A, M.Sc, M.Com, MSW, M.Ed, M.PEd, MTA, PG Diploma, etc., M.Phil, & Ph.D for Post-Matric Scholarship to be awarded by the Government of Karnataka

Conditions to Apply

- 1. Students who have scored not less than 50% marks in the previous final examination only are eligible to apply.
- 2. The annual income of the students' parents / guardians from all sources should not exceed Rs.2 lakhs.
- 3. The students have to submit the filled in applications to the concerned **District officers for Backward Classes and Minorities** or **District officers for Minorities** by post or in-person on or before **30/09/2013**

FOR DISTRICT OFFICE USE	ONLY	FRESH & RENEWAL Present Class & Course:							
% of Marks in Previous Fina	l Exam:								
Annual Income:	Enclosed: Incom	ed: Income Certificate/Affidavit/Salary Certificate							
Religion:	_ Day Scholar ()	Hosteller () Total Fee:							
Signature of the Principal ob	otained Yes / No.	All required documents enclosed Yes/N							
Eligible/Not Eligible (With re	easons):								
Verified/ Scrutinized by:	Date:	Recommended by:							
PA	RT 1 (TO BE FILLED B	Y THE CANDIDATE)							
l. Full Name (in Block Letters a	as per SSLC Marks Car	d) Affix a self							
		attested recent color passport size photograph							
2. SSLC Marks Card Register No	o	(do not staple)							
3. Gender: Male () Female ()								
Date of Birth	Religio	on							
Place of Birth	Domiso	cile Karnataka () Non Karnataka ()							
4. Details of Parents/Guardian	(in Block letters)								
Father's Name									
Guardian's Name									
Father's/Guardian's Occupation									
2 amer of Summani o Secupation									
Annual Income of Parents /Guardian (Please attach income proof document. See Para 12 fordetails)									

If yes furnish Master SL No:- Amount sanctioned

College Name & Address								
& Address								
-								
PINCODE				PHONE	No.			
TALUK				DISTR	ICT			
Name of the Previo	us Exam	ination F	Passed	Yea	ır	Total Marks	Marks Obtained	% of Mark
ACADEMIC DET	AILS				•			
Current Class St	udying				:			
Total Annual Fo		of			(a) Ac	lmission Fee:	(b) Tuition I	Fee:
Fee receipt issued			nstituti	ion)	Total	Fee (a) + (b):		
Course for whic	h the s	cholars	hip is	sought	:			
Details of Educa (Please enclose	ational copies	of mar	rks ca			SLC onwards	na, ITI, Degree, et	
Details of Educa Please enclose	ational copies l or sel	of mains of	rks ca ted) ty / Bo		nte /	SLC onwards		catteste
Details of Educate Please enclose by the principal Examinations	ational copies l or sel	of mains of	rks ca ted) ty / Bo	oard / Institu	nte /	SLC onwards LC, PUC, Diplon Year of	Total Marks Obtained from all the subjects	catteste Percentag
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Details of Educate (Please enclose by the principal Examinations Passed	ational copies l or sel	of man f-attes Universi Coun	ty / Bocil of l	oard / Institu	nte /	SLC onwards LC, PUC, Diplon Year of	Total Marks Obtained from all the subjects	catteste Percentag
Details of Educate (Please enclose by the principal Examinations Passed	ational copies l or sel	of man f-attes Jniversi Cound	ty / Bocil of l	oard / Institu Examinatio	nte / n	SLC onwards LC, PUC, Diplon Year of Passing	Total Marks Obtained from all the subjects (Gross Marks)	Percentag of Marks
Details of Educate (Please enclose by the principal Examinations Passed DAY SCHOLAR Are you staying i	or sel	Jniversi Cound STELL	ty / Bocil of l	oard / Institu Examinatio	ented R	Year of Passing	Total Marks Obtained from all the subjects (Gross Marks)	Percentag of Marks
Details of Educate (Please enclose by the principal Examinations Passed DAY SCHOLAR Are you staying i	or sel	Jniversi Cound STELL	ty / Bocil of l	oard / Institu Examinatio	ented R	Year of Passing	Total Marks Obtained from all the subjects (Gross Marks)	Percentag of Marks
Examinations Passed DAY SCHOLAR Are you staying i	or sel	Jniversi Cound STELL	ty / Bocil of l	oard / Institu Examinatio	ented R	Year of Passing	Total Marks Obtained from all the subjects (Gross Marks)	Percentag of Marks

10. HOME ADDRESS (IN CAPITAL LETTERS)

Date:

1	1													ı
Home Address														
PINCODE	1			PHONE No										
DISTRICT	+			MOBILE No).									
11. Bank Details (i) Name of the st (ii) Saving's Accouding IFSC Code: (iv) Bank Name: (v) Branch Name Note: - Students a college admission	with Ful	aber:	ss:											
(i) Self-attested pa (ii) Xerox copies of 10 th Std onwards (iii) Xerox copy of (iv) Affidavit on no	f all Mar Caste &	rks Car a Incom	ds with	Self Attestat	ion or At	ttestat dar (<u>at</u>	tion by	the l	Princ	cipal	of col	lege/	'instit	tute
				or										
(v) Income certifi					-	, -								
(vi) Xerox copy of	the Fee	Receip	t with d	etails of Adm	ission &	Tuitio	n fee i	ssue	d by	the c	college	e/ins	stituti	on.
(i) I hereby declare purpose from any Scholarship. I und State Government conditions of the scholarship will be	y other dertake t admini scholars	source. that if, a istration ship, the	I shall at any s n that e schola	abide by the stage, it is fou the informati arship sancti	e terms and to the on given oned to r	and constant satisfies a satis	ondition faction ne is f ay be o	ons for the Calse	or san	nctio nctio I vic and t	n of toning and the control of the c	the F author the ntire	Post-M ority i terms amou	Matrice in the and and of
Signature/′ pai	Γhumb i rents/gu			student's					Si	gnat	ure o	f the	stude	ent
Place:										Place	e:			

Date:

14. Verification/information to be furnished by the Head of College/Institution:

(i) It is certified that the infor	mation filled in the above	e mentioned colu	ımns by Shri/Kum	ıari
		Son/daughter o	of Shri /Smt	
	who is studying in	course	Semester _	Year for
the academic year 2013-14 is	n our college. He/she is a	a hosteller () ,	/ day scholar ()	of the college O r
He/She is staying as Paying	guest/in a rented accom	modation at the	address given at 1	para12 as per offic
records.()				
Date :	-			
Place :	_			
	<u>e</u>	•	al / Head of the co having the comple	O ,

AFFIDAVIT FORMAT

(To be typed on a Non-Judicial Stamp Paper of Rs.20/- and notarized by Public Notary with Seal & Signature)

DECLARATION OF PARENTS'/GUARDIAN'S ANNUAL INCOME OF MINORITY JAIN COMMUNITY

I	(Father/Mother/Guardian)
Of	(Name of Student) who
is studying in Standard	d hereby declare that my annual income from all
Sources is Rs (in figures) Rup	peesonly.
I declare that I belong to	Community.
If at any stage, it is found that the informat	ion given by me is false or not true, all benefits given
to the student under the scheme of "Post N	Matric scholarship for students belonging to Jain
Community" could be withdrawn and legal a	action as deemed fit, may be taken against me or my
Ward.	
Date :	Signature (Father/Mother/Guardian)
Place:	
Address:	