

APPLICATION FORM
FOR
ANJALI SCHOLARSHIP FOR HIGHER STUDIES
2014 - 2015

The last date for receipt of application is 25th August 2014 by 5 pm

Please read the following instructions before filling the application form.

1. Only students with **50% and above** disability can apply.
2. Scholarship will be availed by those who are continuing their studies.
3. Scholarship will continued for those who produce a valid continuation certificate every three months from the institution during the receipt of the same.
4. **Disability/ Birth/ Resident/ Income** Certificates are mandatory.
5. Part – I of the form is to be filled by the candidate and Part – II is to be filled by the Head of the Institution / HOD.
6. Address slips in Annexure I should be filled correctly.
7. Paste (Don't Staple) Recent Colour Passport Size Photographs in Annexure I.
8. Attach Annexure II – Filled up continuation certificate with the application form.
9. Disbursement of scholarship will be done from the month of December 2013.
10. Decision of the scholarship committee will be final and binding.

INCOMPLETE FORMS WILL BE REJECTED

Please send the completed form to

Anjali Scholarship Cell,

SWABHIMAN

A/98, Budhanagar,

Bhubaneswar – 751 006

Odisha, India.

Tel.: 0674 – 2313313 / 09238106667

PART – I

(To be filled by the Candidate)

1.	Nature of Disability <i>(Attach Disability Certificate)</i>		Disability %							
2.	Name (In Block Letters)									
3.	Sex	Male / Female								
4.	Father's Name									
5.	Mother's Name									
6.	Permanent Address <i>(Attach Resident/Nativity Certificate)</i>	C/O At PO Via PS Dist Pin State								
7.	Contact Details	Address Mobile No Email :								
8.	Are you a resident of Odisha? District to which you belong	Yes / No								
9.	Community <i>(Attach Caste Certificate)</i>	SC / ST / SEBC / OBC / General								
10.	Date of Birth (In Christian Era)			/			/			
11.	Total Annual Income of both Parents/Guardian <i>(Attach Income Certificate)</i>									

12.	Please state if you are earning If Yes, Please indicate (i) The source (ii) The monthly amount	Yes/No			
13.	Particulars of examinations passed <i>(Attach photocopy of all the mark sheets and certificates)</i>	Class	Board	Year of Passing	%
		10th			
		+2			
		+3			
14.	Have you ever received Anjali scholarship? <i>If Yes</i> , Please indicate (i) Period for which the scholarship was paid	Yes/No			
15.	Requirements/Needs for which scholarship is applied (Whether you require financial assistance or material support?)				
16.	Extra Curricular Activities (if any) (Attach photocopy of all the certificates)				
17.	Academic Details (i) Class/Year (ii) Date of admission to the course			
18.	Are you availing any scholarship? If Yes, please mention the details with the period of availing				

19.	Documents Attached	(i) Disability Certificate
		(ii) Resident / Nativity Certificate
		(iii) Income Certificate
		(iv) Caste Certificate (if any)
		(v) Annexure I
		(vi) Student ID card issued by Institution
		(vii) BPL Card
		(viii)
		(ix)
		(x)

I hereby declare that

- i. I abide the rules and regulations of the scholarship.
- ii. I will accept the decision of the scholarship committee which will be final and binding.
- iii. If I am selected, I will not avail* any scholarship (*except Banishree*).
- iv. The statements made in this application (**PART – I**) are true to the best of my knowledge.

L.T.I / Signature of Candidate

Countersigned by Gazetted Officer / Head of the Institution / HOD

Place:

Date:

PART – II
(To be filled by the Head of Institution / HOD)

1.	Is the candidate enjoying free boarding / lodging facility or any other concession If Yes , please indicate the equivalent amount to the concession	
2.	Is the candidate exempted from school/college tuitionfees? If Yes , please indicate the equivalent amount to the exemption	
3.	Is the candidate residing in the hostel attached to School/College establishment? If Yes , please indicate the date from which residing	
4.	Is there any special provision made by the Institution for the disabled students? If Yes , please mention the provision/s made	
5.	Is the candidate availing any scholarship at present? If Yes , please mention the details with the period of availing	
6.	Remarks	

Certified that

(i) The information given by the candidate in **PART – I** has been checked and found correct.

(ii) The institution is affiliated toUniversity and is recognised by Government of Odisha.

(iii) The course to which the candidate is enrolled is recognised by the University and Government.

Signature of Head of the Institution / HOD

Seal

Place:Name:

Date:Address:

Annexure I

Photograph

(Paste Don't Staple Recent Colour Passport Size Photograph. Not to be Attested)	(Paste Don't Staple Recent Colour Passport Size Photograph. Not to be attested)	(Paste Don't Staple Recent Colour Passport Size Photograph. Not to be attested)
---	---	---

Address Slips

Name :.....	Name :.....
C/O :.....	C/O :
At :.....	At :
PO :.....	PO :
Via :.....	Via :
PS :.....	PS :
Dist :.....	Dist :
Pin : Mobile :.....	Pin : Mobile :.....

Name :.....	Name :.....
C/O :	C/O :
At :	At :
PO :	PO :
Via :	Via :
PS :	PS :
Dist :	Dist :
Pin : Mobile :.....	Pin : Mobile :.....

Anjali Scholarship for Higher Education 2014 – 2015

Certificate of Continuation

Name of the Institution.....

Certified that Sri/Smt/Kum.....is a student of

.....Semester/Year/Class of programme

offered by this Institution. His / Her Roll no. is..... and he / she continues to

be a student of the institution as on date.

Remarks on Anjali Scholar

.....

.....

.....

Place _____

Date _____

Signature of the Principal / HOD

Seal

Name of the Principal / HOD

Mobile No



**Anjali Scholarship Cell, SWABHIMAN,
A/98, Budhanagar, Bhubaneswar – 751 006. Odisha, India.
Tel.: 0674 – 2313313 / 09238106667**