

**CHILDREN OF INSERVICE UNIVERSITY EMPLOYEES
APPLICATION FOR GRANT OF EDUCATIONAL SCHOLARSHIP OUT OF
BENEVOLENT FUND PART-I (BS-16 AND ABOVE)**

(SCHOLARSHIP IS ADMISSIBLE FOR ONLY ONE CHILD OF POST MATRIC CLASSES)

NOTE The children of in-service University employees who are working in research projects/development projects/DPL/on per lecture basis etc are not eligible for grant of educational scholarship out of Benevolent Fund Part-I

1. Name of Univ. Employee. _____
2. Designation _____
3. Department _____
4. Date of Birth _____
5. Copy of Salary Slip must be attached _____
6. Date of Appointment (BPS) _____
7. Amount of Last Deduction of B.F. _____
8. Date of Retirement _____
9. Name of Bank & Account No. of the Employees _____

10. **UNDERTAKING**

I do hereby solemnly declare and affirm that contents of the above application are true to the best of my knowledge and belief that I have concealed nothing. I know that in the event of making a willful misrepresentation or suppression of facts, I shall be liable to disciplinary action.

(SIGNATURE OF THE EMPLOYEE)

11. **CERTIFICATE**

(By the Head of Department of the Employee)

I certify that the applicant is a regular employee of the University and subscriber to the Benevolent Fund. I also certify and attest the details furnished above and:-

- i. Recommend the grant of Scholarship.
- ii. Do not recommend the case for reasons. _____

**Signature and Seal
Chairman of the Department.**

P.T.O.

12. PARTICULARS OF THE STUDENT OF POST-MATRIC CLASS FOR WHOM AWARD OF SCHOLARSHIP IS REQUIRED

- i. Name _____
- ii. Name of the institution where studying _____

- iii. Class _____
- iv. Registration. No. _____
- v. Year of Admission _____
- vi. Annual Fee _____
- vii. Result of the previous Examinations. _____

Matric _____ F.A., F. Sc. _____

B.A. B.Sc., _____ M.A., M.Sc. _____

13. CERTIFICATE BY THE HEAD OF THE EDUCATIONAL INSTITUTION OF THE STUDENT.

Certified that information given under in Sr. No.12 is correct.

**Signature and Seal
Head of the Educational Institution.**

CHILDREN OF INVALID/DECEASED UNIVERSITY EMPLOYEES

**APPLICATION FOR GRANT OF EDUCATIONAL SCHOLARSHIP OUT OF
BENEVOLENT FUND PART-I (BS-16 AND ABOVE)**

(Scholarship Admissible for 3 Children from Primary level)

1. Name of Invalid Pensioner. _____
2. Name of Guardian _____
(in case of death of University Employees)
3. Relation of Guardian with the deceased employees _____
4. Designation of Invalid Pensioner/ _____
Deceased Employees
5. Department _____
6. Date of Birth _____
7. Date of Appointment _____
8. Date of Invalidation /Death _____
(Enclose a certificate for Invalidation/Death)
9. Annual Income of the Invalid Pensioner _____
or Guardian from all sources.
(Please specify sources)
10. No of children for whom scholarship are required.
11. **UNDERTAKING**

I do hereby solemnly declare and affirm that contents of the above application are true to the best of my knowledge and belief that I have concealed nothing. I know that in the event of making a willful misrepresentation or suppression of facts, I shall be liable to disciplinary action.

(SIGNATURE OF THE EMPLOYEE)

12. **CERTIFICATE BY THE HEAD OF DEPARTMENT OF THE EMPLOYEE**

I certify that the applicant is a regular employee of the University and subscriber to the Benevolent Fund. I also certify and attest the details furnished above and:-

- i. Recommend the grant of Scholarship.
- ii. Do not recommend the case for reasons. _____

**Signature and Seal
Chairman of the Department.
P.T.O.**

13. PARTICULARS OF THREE STUDENTS FOR WHOM AWARD OF SCHOLARSHIP ARE REQUIRED

I.

- i. Name of Student _____
 - ii. Name of institution _____
 - iii. Class _____
 - iv. Registration. No. _____
 - v. Year of Admission _____
 - vi. Fee Annual Fee _____
 - vii. Boarder/ Non-Boarder. _____
 - viii. Result of Previous Examinations. _____
- _____
- _____

CERTIFICATE BY THE HEAD OF THE EDU. INSTITUTION OF THE STUDENT.

Certified that:-

- i. Informations given under Col. 13(I), are correct.
- ii. He/She bears good moral character;

**Signature and Seal
Head of the Educational Institution.**

II.

- i. Name of Student _____
 - ii. Name of institution _____
 - iii. Class _____
 - iv. Registration. No. _____
 - v. Year of Admission _____
 - vi. Fee Annual Fee _____
 - vii. Boarder/ Non-Boarder. _____
 - viii. Result of Previous Examinations. _____
- _____
- _____

CERTIFICATE BY THE HEAD OF THE EDU. INSTITUTION OF THE STUDENT.

Certified that:-

- i. Informations given under Col. 13(II), are correct.
- ii. He/She bears good moral character;

Signature and Seal
Head of the Educational Institution.

III.

- i. Name of Student _____
 - ii. Name of institution _____
 - iii. Class _____
 - iv. Registration. No. _____
 - v. Year of Admission _____
 - vi. Fee Annual Fee _____
 - vii. Boarder/ Non-Boarder. _____
 - viii. Result of Previous Examinations. _____
- _____
- _____

CERTIFICATE BY THE HEAD OF THE EDU. INSTITUTION OF THE STUDENT.

Certified that:-

- i. Informations given under Col. 13(III), are correct.
- ii. He/She bears good moral character;

Signature and Seal
Head of the Educational Institution.