

MARWARI SAMMELAN FOUNDATION

(Akhil Bharatvarshiya Marwari Sammelan)

Duckback House, Room 4B, 41 Shakespeare Sarani, Kolkata-700017

Contact: 033 – 4004 4089; Email: msfkolkata@gmail.com

SCHOLARSHIP APPLICATION FORM

Date.....

PERSONAL DETAILS		
Name :		
Address :		
City/Town: _____	State : _____	Pin Code : _____
Telephone/Mobile: _____	Email : _____	
Date of Birth : <u>DD / MM / YYYY</u>	Gender : _____	Native Place : _____

PHOTO

Class	Academic Background	Marks Obtained (%)	Year of Passing	Aggregate Marks (In %)
Secondary	School: Board: Subjects:- 1: 2: 3: 4: 5: 6:		
Higher Secondary	School: Board: Subjects:- 1: 2: 3: 4: 5: 6:		
Graduation	College: University: Course: B.Sc/ B.Com/B.A/Other(specify)			

Extra-Curricular Activities/Achievements accomplished:

School:

College:

Others:

FAMILY BACKGROUND: -

Relation	Name	Age	Qualification	Profession/Occupation
Father				
Mother				
Sibling				
Sibling				

(attach separate sheet if required)

AVERAGE ANNUAL FAMILY INCOME (Amount in Rupees): - _____
(With supporting documents)

DETAILS OF THE COURSE WHICH YOU WANT TO JOIN OR ALREADY PURSUING: -

Name of the Institution/University :	
Name of the course :	
Year of Admission :	Duration of the course :
Course fee details (enclose fees structure) :	
Proof of Admission / Offer for admission :	
Presently studying in (year/semester) :	

Tuition fee payable Amount (Rs.) :	For Year/Semester :
Due date for payment : DD / MM / YYYY	Mode of payment (as prescribed by the Institution) : Cheque/Demand Draft/RTGS/Other
Issued in the Name of : _____ (as prescribed by the Institution)	

DECLARATION:

I _____, do hereby declare that:

- The above information is true and correct to the best of my knowledge and belief
- I am genuinely in need of financial help for my education,
- I hereby undertake to contribute to the Higher Education Fund of Marwari Sammelan Foundation, at least the total amount granted to me within 5 (five) years of completion of my course.
- I also promise to keep the Marwari Sammelan Foundation updated on the status of my education and job/occupation.

(Students Signature)_____
(Guardian's Signature)

THE PROPOSER: - (To be filled in by the proposer)

Name:
Designation:
Address:
.....
Contact No: E Mail ID:
Period for which you have known the candidate:
Date:
Place: _____ <i>Signature</i>

FOR OFFICE USE ONLY:-

Application No: - Date of Receipt of Application: - Date of Interview: -
Remarks (if any):
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The Application form should be accompanied by the following documents:-

- Mark Sheets of all the examinations passed since matriculation (Class 10 and thereafter).
- Two passport size photographs.
- Proof of Identity (Passport / Driving License / PAN Card / Adhaar Card / Voter Id Card), any one.
- Address Proof (Passport / Driving License / Voter Id Card / Adhaar Card), any one.
- Details of Course fee / Fees payment structure – as provided and duly certified by the Concerned Educational Institution.
- A family photograph.
- Evidence / Certificate of family income.