



UTTORAN-AN ENDEAVOUR

(A social welfare organization by students)

Estd. - 2012, Reg. No.:- S/2L/34008 of 2014-15, Mobile No- 9002733771/9476318934

Contact Address: Kankata, Kenduadihi: Bankura-722102, Website: www.bankurauttoran.org

Application Form FOR "UTTORAN SCHOLARSHIP"

PASSPORT
SIZE PHOTO

To be filled by the student:

1. Student's Details (write in capital letters):

Name(in block latter)	
Father's Name	
Mother's Name	
Gender	Male/Female/Others
Date of Birth	
Current Course of Study	
Name of last Qualifying Exam.	
Percentage of marks obtained	

2. Permanent Address:

Name	
Mohalla/Street	
Village/Town	
District	
State	
PIN	
Mobile No.	
Email ID	

3. Other Details

Whether differently abled (Yes/No)	
Category & percent (%) of disability	
Occupation of Guardian	
Mobile No. of Guardian	

4. Details of Institute which the student is admitted for the current academic year:

Name of the Institute	
Address of the Institute	
District	
State	
PIN	
Name of the Director/Principal/Head of the Institute	

5. Annual family Income of Parents of the student:- Rs./-
(Certificate of annual family income for the current financial year issued by B.D.O or higher officer is to be attached).

6. Documents enclosed with the application (self-attested documents along with the application):

SL No	Name of the Documents	Attached(Yes/No)
1	Copy of AADHAR card as proof of identity and address	
2	Copy of Admit Card of Madhyamika Exam./School Certificate as proof of birth	
3	Copy of Mark sheet of last qualifying examination	
4	Copy of annual family income certificate for the current financial year issued by B.D.O or higher officer	
5	Copy of Certificate issued by competent authority in the case of differently abled students (if applicable)	
6	Certificate issued by the Director/Principle/Head of the Institute (Annexure-I)	

7. Declaration by the student:

- I hereby declare that the information given above is correct.
- I am give up the scholarship after getting a better one.
- I shall abide by the terms and conditions for sanction of the Scholarship.
- I undertake, that if at any stage, it is found that the information given by me is false or if I violate the terms and conditions of the Scholarship, the Scholarship sanctioned to me, will be cancelled and the entire amount of Scholarship will be refunded by me or recovered from me, apart from liability of penal action as warranted by law.

Date: _____

Place: _____

(Signature of the candidate)

Annexure-I
Certificate

(To be issued by Director / Principal / Head of the Institute)

It is to certify that Mr/Ms. _____

S/o, D/o _____

A student of this institute studying in class/course _____

and the information furnished by his/her is correct.

Recommended for the help.

Date:

Place:

(Signature with seal)