THE GOA HINDU ASSOCIATION

Estd. 1919 Regd. 1940

Gomantdham, 385, Dr Bhadkamkar Marg,

Mumbai – 400 007

SCHOLARSHIP APPLICATION FOR HIGHER STUDIES (SPECIAL CATEGORY)

| 1) | Name of Applicant: | | | | | |
|----|--|-----------|------------|--|--|--|
| 2) | Full Postal Address: | | | | | |
| 3) | Date of Birth: Native Place: | | : | | | |
| 4) | Name and Address of Institute where you have completed your HSSC: | | | | | |
| | | | _ | | | |
| | | | | | | |
| 5) | Marks secured at HSSC exams: Total | Out of | Percentage | | | |
| 6) | Name and Address of Institute where you intend to pursue your further stuc | | | | | |
| | | | | | | |
| 7) | Name of Course: | Duration: | | | | |

8) Details of annual expenditure to be incurred for higher education:

| Annual Tuition Fee | Development fee | Other Fees | Book | Transport | Total |
|-----------------------|--------------------|------------|------|-----------|-------|
| Rs | Rs | Rs | Rs | Rs | Rs |

9) I hereby apply for this Scholarship as my Parents/Guardians are not in a position to render full financial support for my higher education. I consider it my moral duty to support the Trust in form of donation as soon as I am in a position to do so.

(Applicant)

Note: A certified copy of statement of marks should be attached.

ANNEXURE –A

| a) Name: | |
|---|--|
| b) Address: | |
| c) Relationship with Applicant: | |
| d) Profession: Annual Income: | _Total Income of Family: |
| e) Employer's Name and address (if employed): | |
| 11) Undertaking by Parent/Guardian: | |
| I, Shri/Smt applicant .I, and followed the rules and regulations relating to th | hereby confirm that I have read |
| | (Parent/Guardian) |
| 12) Attestation by Honourable Goan Personality: | |
| | |
| I know Shri/Kum | for the last years, I confirm |
| | for the last years, I confirm factually correct. I recommend the above student for |
| that the information furnished in this application is | factually correct. I recommend the above student for |
| that the information furnished in this application is the necessary Scholarship. | factually correct. I recommend the above student for |
| that the information furnished in this application is the necessary Scholarship. Name and Address of Signatory: | factually correct. I recommend the above student for |
| that the information furnished in this application is the necessary Scholarship. Name and Address of Signatory: | factually correct. I recommend the above student for |
| that the information furnished in this application is the necessary Scholarship. Name and Address of Signatory: Profession: | factually correct. I recommend the above student for |
| that the information furnished in this application is the necessary Scholarship. Name and Address of Signatory: Profession: <u>Decision of the Managing Committee</u> | factually correct. I recommend the above student for (Signature) |

(Chairman)

Student Bank Details

| A/C No: | Bank Name: |
|------------|------------------|
| Branch: | A/C Holder Name: |
| IFSC Code: | MICR: |