

**RENEWAL**Application No :  
(For Office use)

**Government of Kerala  
Backward Classes Development Department**

**Application for OBC Postmatric Scholarship 2019-20**

1. Name of the candidate :

2. Name of Father/Mother/Guardian:

Affix a recent  
stamp size  
photograph here  
duly signed

3. **Address**

Permanent Address (With District & Pin code)	Address for Communication (With District & Pin code)
Phone No with STD code :	Mobile No :
Email (if any) :	

4. Date of Birth

5. Religion

6. Caste

7. Gender

8. Annual Income

9. Adhar No

10. **Details of Present Institution**

Name & full postal address of Institution with pin code	Sanctioned Amount details in Previous years 2016, 2017, 2018, 2019		
	Amount	Year/Semester	Credit Date
	Rs.		
	Rs.		
	Rs.		
State :			
Type of Institution : Govt/Aided/Self Financing			
Email :			
Website (if any) :			

11. Are you enjoying any other scholarship from any agency ?  
(If yes, Specify the details)

12. Mention whether Day Scholar or Hosteller

a) If day scholar, mention the distance between residence and the institution (in kms)

b) If hosteller, mention the monthly hostel fee &amp; other expenses (in rupees)

13. **Bank Account Details of the Applicant**

- 1) Name of the account holder :
- 2) Account Number :
- 3) Name of Bank :
- 4) Branch :
- 5) IFS code :

### **Declaration of the Applicant**

I , .....(Name & address ) hereby declare that I am studying in ..... (Name of institution) which is situated outside Kerala; and the details filled in this application are true to the best of my knowledge and belief. If any state, it is found that the information given by me is false, the scholarship granted to me could be withdrawn and legal action as deemed fit, may be taken against me.

Place :

Signature of the student

Date :

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#### **Enclosures should be attached**

❖ Copy of Identity Card from the institution	❖ Detailed Fee Structure (Attested by the Institution Head)
❖ Bonafide Certificate	❖ Hostel Inmate Certificate from competent authority (in the case of hostellers)

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#### **For Office Use**

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# OBC Postmatric Scholarship

Government of Kerala

Personal Details of the applicant	
Name of applicant	
Name of parent	
Date of birth	
Permanent address	
Religion & Caste	
Course Details	
Name of Course	
Date of admission	Admn. No :
Duration in years	
Current year/Semester	
Type of Admission	Merit/Reservation/Management/Sports
Type of course	Full time/Part time
Fee remitted	Rs.

*Name & signature of the applicant*

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## *Bonafide Certificate*

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1. Certified that the above furnished details are found true with reference to the certificates and records kept in this institute.
2. Certified that the student is not in receipt of scholarship from any other agencies.
3. Certified that the attested copy of the fee structure (specify refundable & non-refundable fee) approved by state/central government is attached.
4. Certified that the student has got admission on merit/reservation; (Not in management quota).
5. Certified that the student attends classes regularly and his/her average monthly attendance is more than 80%.
6. Certified that the character & conduct of the student is satisfactory/good.

Place :

Office seal

Name & Signature of the Head of Institution

(Designation Seal)

Date :