



Application No : (For Office use)

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**Government of Kerala** 

**Backward Classes Development Department** 

## Application for OBC Postmatric Scholarship 2018-19

1.	Name of the candidate :					Affix a recent stamp size
2.	Name of Father/Mother/Guardian					photograph here duly signed
3.	Address					
з.	Permanent Address (With Distric	ct & Pin code)	Address for	Communicat	ion (With Distr	rict & Pin code)
	Phone No with STD code :	М	obile No :			
	Email (if any) :			_		
4.	Date of Birth	5. Religion		6. Caste		
7.	Gender	8. Annual Income		9. Adhar N	0	
10.	Details of Present Institution					
				unt details in Previous years 16, 2017, 2018		
			Amount		ar/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)						
()	in yes, specify the details j	_				

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 If any state, it is found that the information given by me is false, the scholarship granted to me could be withdrawn and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

Place : Date : Signature of the student

Enclosures should be attached						
<ul> <li>Copy of Identity Card from the institution</li> </ul>	<ul> <li>Detailed Fee Structure (Attested by the Institution Head)</li> </ul>					
* Bonafide Certificate	<ul> <li>Hostel Inmate Certificate from competent authority (in the case of hostellers)</li> </ul>					

For Office Use

## 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

Bonafide Certificate

- 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 : Date : Office seal

Name & Signature of the Head of Institution (Designation Seal)