



## This form is free

## **INSTRUCTIONS PAGE**

Please read the following instructions before filling the application form:

- 1. The form needs to be filled in English, preferably.
- 2. Enter all the details in BLOCK letters using a ball point/gel pen and complete all the sections in full.
- 3. Applicants are required to submit the application form with the following enclosed:
  - One recent passport size color photograph.
  - Clear photocopy of the:
    - > First two pages of the applicant's bank passbook. Please note that the bank account should be in the name of the applicant; and Grameen Bank accounts will not be considered.
    - > Applicant's Aadhaar Card.
    - > Grade 10 certificate.
    - > Grade 12 certificate.
- 4. Application Period:

The applications will be available from July 15th, 2019 and the last date for receiving completed form is August 15th, 2019. Applicants are encouraged to apply at the earliest possible date.

5. The application form along with the enclosures must reach the following address by post or a reliable courier. Wipro Cares is not responsible for any lapse in postal or courier services.

The filled in application must be addressed to:

Wipro Cares — Santoor Scholarship,

Doddakannelli,

Sarjapur Road,

Bangalore — 560 035

6. In case of any queries, send an email to santoor.scholarship@buddy4study.com or call us at 011-430-92248 (Ext- 121) / +917337835166 / 1800-425-1969

## **TERMS AND CONDITIONS:**

**KARNATAKA** 

The applicant is required to read the following terms and conditions in its entirety. The candidate on submitting the application is deemed to have accepted the terms and conditions herein.

- 1. This form is meant for applying for a grant under the 'SANTOOR SCHOLARSHIP' program for the year 2019-20, for girl students who wish to pursue higher education after grade 12, in any discipline of a minimum of three years' duration.
- 2. Eligibility criteria:

The Santoor Scholarship program is available to students from the states of Andhra Pradesh, Karnataka and Telangana only. To be eligible to apply, the applicants must:

- Have completed their grade 10 in a government school.
- Have successfully completed their grade 12/Inter/PUC in the academic year 2018-19 in a government school/college.
- Enroll for a full time recognized degree program beginning 2019-20, in any recognized educational institution. The duration of such a course should be of a minimum of three years.
- 3. Any application which does not meet the prerequisites is liable to be rejected.
- 4. Wipro Cares reserves the sole right to offer the scholarship and also has the right to modify/reject/withdraw and/or discontinue the offer without assigning any reason. No other body/agency is authorized to make any offer on the Santoor Scholarship.
- 5. Application doesn't guarantee the scholarship.

## APPLICATION FOR GRANT UNDER SANTOOR SCHOLARSHIP PROGRAMME 2019-20



APPLICATION NO. (Not to be filled by Applicant)	
PERSONAL AND CONTACT DETAILS:	Affix a recent
1. Name in full (as it appears on grade 10 certificate)	passport color photograph here
2. Date of Birth (date/month/year) :	
3. Aadhaar Number of Applicant :	
4. Domicile:  Karnataka Andhra Pradesh Telangana	
5. Father's name:  6. Mother's name:	
7. Email ID:  BRIGHTENING WOMEN'S FUTURE	
8. Complete Postal Address:	
——————————————————————————————————————	
District — State —	
Police station/Gram panchayat — Pin Code:	
9. Permanent Address:	
——————————————————————————————————————	
District — State —	

Police Station/Gram Panchayat———

Pin Code:

10. Contact details:			<u> </u>
Mobile number of:			SAN
Applicant :	+91		3/ "
Father/Guardian:	+91		
Mother:	+91		
EDUCATION DETAILS:  11. Details of School/Juni	ior College/Inter/PU ec	ducation:	
A. Class 10 Details:			
Name of the School/Junio  Complete Address of the S			
		5: . :	
City State		District Pin Code	
Passing Year		Percentage // Grade	
Type of School Governi	ment Governm	nent Aided Private	
B. Class 12 Details:  Name of the School/Inter		OMEN'S	
Complete Address of the S	School/ College RIGHTEN	NING WOMEN'S FUTURE	
City		District	
State Passing Year		Pin Code Percentage	
rassing real		/Grade	
Type of School Govern	ment Governm	nent Aided Private	
C. Details of Course Er	rolling for:		
Name of the Institution			
Complete Address of the I	nstitution		
Complete Address of the li			
City		District	
State		Pincode	
Contact No.			

Name of the Co	ourse	<b>:</b> :	В.	TEC .Ar B.E	ch [			BE BA   B.Pl	harr		∕IB BE	BS [ BM [		E	BDS BFA om			B.S								S	Λl	11	0	)R
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12. Bank Det	ails	:																												
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Bank Name																														
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A/c Number		$\Box$																												
IFSC Code																														
Branch Name		$\Box$		_																										
I hereby declare that the information furnished above is true. I understand that I may be asked to produce documents in support of the claims made in the application, and authorize Wipro Cares to review and verify the information provided to establish its authenticity. I agree that if the information provided is found to be false/incorrect it may result in rejection of the application or withdrawal of future grant provided at any time of the tenure of the scholarship program.  Date:  BRIGHTENING WOMEN'S FUTURE  Parent/guardian's signature:																														
I hereby validat I agree that if th withdrawal of f	ne in utur	at t Ifor	the rma gran	in atic nt p	forr on f orov	mat urn vide	ioi ish ed	n fu ned at a	is fa ny t	hed Ise,	d a /in e o	bow cor of th	e b rect e te	y t t it eni	he : ma ure	stu y re of	de esu the	nt i Ilt i	s t n t ho	rue he lar	e to re	o tl ejeo ip	he Ctic	be on ogi	of t	the n.	ap	plic		_
Date: Principal's na																														