

Suparn Charitable Trust, Pune

(Telephone: 2553 9338)

Please paste a recent passport-size photo in the space on the right side.



Information to be filled by Student applying for financial assistance:

1. Full Name of Student: _____
2. Date of Birth: _____
3. Full Name of Guardian: _____
4. Relationship with Guardian: _____
5. Occupation of Guardian: _____ 6.
Annual Income of Guardian: _____
7. Address of the Guardian: _____

8. Address for correspondence: _____

9. Mobile Number: _____
10. School name and Address from which 10th standard examination(SSC) passed:

11. Marks in 10th and later exams* : (Please attach a copy of marksheet for each exam):

Exam	Percentage
10 th	
12 th /Diploma	
PG Diploma/Degree	

12. College name where you have taken/applied for admission along with branch(stream) and year:

13. Expectation for Financial Assistance:

Admission/Course Fee . _____ ₹

Textbooks/Notebooks . _____ ₹

Other (please mention details) . _____ ₹

14. Name and Address of two people who know the Applicant:

15. Any other relevant information, you would like to mention:

I agree that all the information I have filled above is true to the best of my knowledge.

Date:

Signature of the Student

* For students who have completed/continuing education after 10th standard.