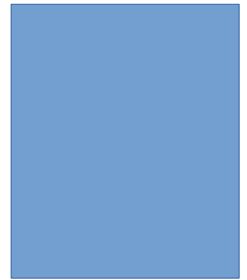


Suparn Charitable Trust, Pune

(Telephone: 2553 9338)

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



Information to be filled by Student who requires financial assistance:

1. Full Name of Student: _____
2. Date of Birth: _____
3. Full Name of Guardian: _____
4. Relationship to the Guardian: _____
5. Occupation of Guardian and Annual Income:

6. Address of the Guardian:

7. Address for correspondence:

8. Mobile number for correspondence: _____
9. School name and Address from which 10th passed:

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

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

12. Expectation for Financial Assistance:
Admission/Course Fee ₹. _____
Textbooks/Notebooks ₹. _____
Other(please mention details) ₹. _____

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

14. Any other important information as per the Applicant:

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.