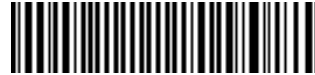


## GOVERNMENT OF GUJARAT

Submit Date : 30/09/2025

PM -YASASVI Post Matric Scholarship for OBC, EBC and DNT  
StudentsApplication No:  
252600000000172285

Renewal Application

Previous Application No: 242500000000418171

Previous Paid Scholarship:

**Student Basic Details**

Name of Student : Unjiya Hetvi Miteshbhai	
Name of Student (As per Aadhar) : Unjiya Hetvi Miteshbhai	
Date of Birth : 06/11/2004	Gender : Female
<b>Student Aadhar Details</b>	

☒ I voluntarily give my consent to use my Aadhaar details.

Aadhar No : 74xxxxxx5333	Aadhaar Status Verified: Yes(28/09/2025 16:27:31)
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**Student Ration Card Details**☒ **Consent Status:** I hereby give my consent to use my personal data available with food and civil supply department. I hereby give my consent to government of Gujarat for fetching my identity for the purpose of post matric scholarship.

Ration Card No. : 110010003818489	Ration Card Member No. : 110010003818489003
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Name As Per Ration Card: (Unjiya Hetvi Miteshbhai / ઉંજિયા હેત્વી મીતેષભાઈ )	
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EKYC Status As Per Ration Card: Yes	EKYC Date: 23-10-2024
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Aadhar Number Matched With Ration Card: Yes	
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**Student OTR Details**

OTR KYC : 25010075916207	OTR KYC : C
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Name as Per OTR : Unjiya Hetvi Miteshbhai	
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**Other Details**

Mother's Name : Pragnaben	
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Category : EBC(આર્થિક રીતે પછાત વર્ગ)	Religion :Hindu
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Caste :	linguistic Minority :
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Marital Status : Unmarried	Parent/Guardian occupation: Agriculture(ખેતી)
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Annual Income of Parents/Guardian/Husband (Rs): 140000	Habitation Type: Urban
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Is Orphan: NO	
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Mobile Number : 7984791381	E-mail Address : hetviunjiya@gmail.com
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Day Scholar / Hosteller: Day Scholar	
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Hostel Type:	
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<b>Current Address:</b>		<b>Permanant Address:</b>	
State	Gujarat	State	Gujarat
District	Morbi	District	Jamnagar
Taluka	Morbi	Taluka	Jamjodhpur
Village		Village	
PinCode	363642	PinCode	360530
Address:103-Jankalyan Appartme, lakshmi narayan Society , morbi-2		Address:Ramvadi-3, jamjodhpur, jamnagar, 360530	

**Student Bank Account Detail/Aadhar Bank Detail**

Aadhar Number : -	Bank name : -
NPCI Date :	NPCI Status : -



☒ I am giving my consent for payment of scholarship amount in my bank account, linked with Aadhar.

<b>Account No :</b> 41xxxxxx5914	<b>IFSC Code :</b> SBIN0060071
<b>Student Name(As per Bank Name):</b> Unjiya Hetvi Miteshbhai	
<b>Name of Bank :</b> STATE BANK OF INDIA	
<b>Branch Name &amp; Address :</b> PARA BAZAR, MORBI	

☒ I hereby accept that

- 1.Details provided by me are correct to best of my knowledge
- 2.Shall not make any claims if amount is transferred to a wrong account due to incorrect details provided by me
- 3.Shall refund the amount transferred to someone else's account due to incorrect details provided by me
- 4.I will refund the excess amount credited to my account, if any.

## Student Academic Details

<b>Admission Type :</b> Regular Seat(Government Quota)	
<b>Present Course/Class/Trade Type:</b> Engineering & Technology	
<b>Present Course/Class/Trade Name :</b> B.E. (Bachelor of Engineering)	
<b>Present Course/Class/Trade Year :</b> 4TH YEAR(7th Semester/8th Semester)	
<b>Studying in :</b> Gujarat	<b>Enrollment No:</b> 220310116033
<b>Present Institute District :</b> Morbi	<b>Present Institute :</b> Lukhdhirji Engineering College,Morbi(031)
<b>Present Branch Course :</b> Information Technology	
<b>Enter Your Research/Thesis Subject :</b>	
<b>Present Class Start Date :</b> 28-Jul-2025	<b>Present Course Completion Date :</b> 30-May-2026

Fees	Amount
<b>Admission Fees (Rs)</b>	0
<b>Tution Fees (Rs)</b>	0
<b>Misc.Fee(NonRefundable Fees)</b>	915
<b>Exam Fees(Rs)</b>	950
<b>Total (Rs)</b>	1865

<b>Previous stream :</b> B.E. (Bachelor of Engineering)	<b>Previous Class/Course :</b> 3RD YEAR(5th Semester/6th Semester)
<b>Previous Passing Year :</b> 2024	<b>Previous (%) :</b> 70.00
<b>Educational Break :</b> No	<b>No. Of. Year in Break :</b>

## Previous Education Detail

Course/Class/Trade Type	Course/Class/Trade Name	Branch Name	Seat No	Passing Year	Percentage
9th Std/10th Std	10TH	SSC	C9056799	2020	85
11th Std/12 Std	12TH	Science	B141875	2022	76

## Disability Detail

<b>Is Disability :</b> No	<b>Type of Disability :</b> -
<b>Percentage of disability :</b> -	<b>Required Guide/Coaching Guide:</b> No
<b>Guide Name:</b> -	
<b>Guide Address:</b> -	

## **List of documents which you have attached :**

- 1 Caste Certificate From the Competent Authorities
- 2 First Page Of Bank PassBook/Cancelled Cheque
- 3 Fee Receipt of Current Course Year
- 4 Self Attested Certificate of Previous academic marksheet
- 5 Income Certificate (Competent Authority)(Form no.16 required For Govt. Employee)

I have read all above terms and conditions and understand them fully, I hereby declared that here I am submitting only one application for scholarship and I haven't received any other scholarship/stipend or fellowship in this current session under any other central/state government scheme. I further state that all information furnished by me is correct to my knowledge in case of any the false information or suppression of necessary data proved in my application is liable to get cancelled at any stage of the scholarship process and the entire amount of scholarship will be refunded by me or recovered from me. Government decision shall be final and binding on me.

**Date :** 01/10/2025

**Verify Mobile Number :** Yes 30/09/2025

**Place :**

**Signature of the applicant**

It is certified that the information filled in the above mentioned fields by the students are correct to the best of my knowledge and all the Documents has been checked.

It is also certified that in case the applicant leaves institution or otherwise discontinues the studies or detained or accepts any other regular scholarships/stipend/ fellowship the fact will be immediately reported to the said authority

Certified that the student is eligible for scholarship amount subject to Central/State government rules and the student is recommended for sanction of scholarship.

This is to certify that student has regularly attended classes and maintained minimum attendance criteria till date for the A.Y. 2025 -2026. If student will irregular, than we will immediately reported to the said authority.

The actual School/College/University year began on \_\_\_\_\_ and will be ended on \_\_\_\_\_

**Signature Of Head Of The School/College/Institute/University With Official Seal**

**Place :**

**\*Note : Stamp Signature will not be accepted**

**Date :**