

## STUDENT AID REQUEST FORM

Date: 8 July 2025

### Student Information

**Form ID**

D20250001

**Gender**

Female

**Study Medium**

English

**School Name & Address**

Malad (west), malwani gate no 8

**Student Name**

Fidause FARUK SHAIKH

**Academic Year**

2025-2026

**Class / Grade / Standard**

SYBCA

### Parent / Guardian Information

**Parent / Guardian Name**

FARUK SHAIKH

**Mobile Number ( WhatsApp Number )**

8591013795

**Source of Income**

software company

**Residence Address**

Malad (west), malwani gate no 8

**Reason for requesting financial aid**

Testing

**Requested Amount ( as per school / college )**

15,000

**Alternate Mobile Number**

9819894066

### School Bank Account Details

**Bank Account Holder Name**

FARUK SHAIKH

**IFSC Code**

SBIN0007865

**Bank Account Number**

50100487452316

**Bank Name**

MALWANI, MALAD

### UWF Member / Coordinator Information

**UWF Member / Coordinator Name**

ANSARI MOHD KAIF

**UWF Member / Coordinator Mobile Number**

8591013795