Elite Institute of Technology

SCHOLARSHIP APPLICATION FORM

PERSONAL INFORMATION

Name: _____

Father's Name: _____

Date of Birth: _____

Gender: _____

ACADEMIC INFORMATION

Current Program: _____

Semester: _____

Current CGPA: _____

SCHOLARSHIP TYPE

â Merit-based Scholarship

â Need-based Financial Assistance

â Sports Scholarship

â Research Scholarship

FAMILY INCOME

Annual Family Income: _____

Number of Family Members: _____

DECLARATION

I declare that the information provided is true and I will abide by the scholarship terms.

Signature: _____

Date: _____