A.M.M. FOUNDATION

AMM MURUGAPPA CHETTIAR CENTENARY SCHOLARSHIP

Application Form READ THE BELOW INSTRUCTIONS BEFORE FILLING THE FORM



1. The Application can be filled up in **English or Tamil**
2. Applications with incorrect or incomplete information will be rejected
3. The scholarship shall be governed by the regulations issued by the A.M.M Foundation and the decision of the Foundation shall be final and binding
4. Send the completed forms to **[scholarship@ammfoundation.org](mailto:scholarship@ammfoundation.org)**
5. Please attach copy of Mark Sheets in X Std and XII Std
6. Attach Income certificate. Income given under 3 below should include actual income of the family from all sources and not just based on Income Certificate from Revenue Department
7. Attach statement of fee details from the college & Copy of the receipt of last paid fees

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| **1** | **Name & Address of the Applicant**-  (As per School/College records with proof) | | | | | SRINITHI MAHALAKSHMI A,  86/A,KAMACHI AMMAN KOVIL STREET ,  VETTAIKARAN PHUDUR-642129 | | | | | | | |
| **2** | **Contact Landline /Mobile Number (parent)** | | | | | 6382471769 | | | | | | | |
|  | **Applicants Mobile Number** | | | | | 8667236165 | | | | | | | |
| **3** | **Details of Parents / Guardian (In case of incorrect information, the application will be rejected)** | | | | | | | | | | | | |
| **Relationship** | | | | **Name** | | **Qualification** | | **Employment** | | | | **Monthly Income (Rs)** | |
| Father | | | | Late.ARUMUGAM V S | | 9TH | | - | | | | - | |
| Mother | | | | KAVITHA A | | B.A(TAMIL) | | HOUSE WIFE | | | | - | |
| Brothers & Sisters | | | | SRI ANUJA A | | B.E(EEE) | | SOFTWARE  ENGINEER | | | | 25,000 | |
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| Guardian | | | |  | |  | |  | | | |  | |
| Income from other Source: | | | | | | | | | | Total Monthly Income\* | | 25,000 | |
| ***\*Should include the actual income of the family from all sources not just based on Income Certificate*** | | | | | | | | | | | | | |
| **4** | | **Details of the Student:** | | | | | | | | | | | |
| **Name: SRINITHI MAHALAKSHMI A** | | | | | | **Sex: FEMALE** | | **Date of Birth:23.08.2004** | | | | | |
| **4.1 School studied and mark obtained in X std and XII std (Attach Copy of Mark Sheet of X Std and XII Std)** | | | | | | | | | | | | | |
| **Exam Passed** | | | | **Marks** | **Name of School** | | | | **Govt/Aided/ Matric** | | **Medium of Instruction** | | **Fees paid per year** |
| **X Std** | | | | 452/500 | FOREST HILL ACADEMY MATRIC HIGHER SECONDARY SCHOOL | | | | MATRIC | | ENGISH | | 50,000 |
| **XII Std** | | | | 535/600 | FOREST HILL ACADEMY MATRIC HIGHER SECONDARY SCHOOL | | | | MATRIC | | ENGLISH | | 60,000 |
| **4.2 College where the student is studying now** | | | | | | | | | | | | | |
| **Course** | | | | | **Month / Year of Joining** | | **Name & Address of the College** | | | | | | |
| B.E(BIOMEDICAL) | | | | | NOV 11 2022 | | RATHINAM TECHNICAL CAMPUS,  ECHANARI,COIMBATORE | | | | | | |
| **5** | **Fee Details: Statement of fees from the college & copy of the receipt for last paid fees to be attached** | | | | | | | | | | | | |
| **College Fees** | | | **Refundable Deposits** | | **Hostel Fees** | | **Mess Fees** | | **Fees paid at the time of counseling** | | | **Any other Fee** | |
| 25,000/SEM | | | - | | - | | - | | 5,000 | | |  | |
| **Total Fees for the year** | | | | | 50000 | | | | | | | | |

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| **6** | **Are you in receipt of scholarship, fee concession / fee discount or other financial support from your school or any other organisation in the past or at present? If give Yes, give details** | | | | | |
| **Details of Scholarship, Fee Concession, Donation, etc** | | **Course for which received** | | **Year** | **Amount {Rs)** |
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| **7** | **Bank Details of the Parent/Guardian/Applicant ( Attach a copy of the front page of your Passbook)** | | | | | |
| Name of the Account Holder : SRINITHIMAHALAKSHMIMAHALAKSHMI ARUMUGAM | | | | Account Number: 43017743109 | | |
| IFSC Code: SBIN0002194 | | Name and address of the Bank: STATE BANK OF INDIA, 31/1 SETHUMADAI ROAD,  ANAIMALAI. | | | | |
| **8. About Yourself** | | | | | | |
| **8.1Describe your family’s living conditions?**  WE ARE FOUR MEMBERS IN MY FAMILY,  IAM A 3RD YEAR STUDENT OF BIOMEDICAL ENGINEERING HAVING LOT OF RESPONSBITIES CARRYING BY MYSELF.  MY MOTHER HAS BEEN A STROKE PATIENT PAST 4 YEARS ,SHE DOENOT ABLE TO HER WORK ALONE.BY THIS SITUATION MY FATHER HAD PASSED AWAY LAST DECEMBER 21,2024 UN FORTUNATELY BY LUNG DISORDER.NOW MY FINANCIAL CONDITION IS VERY POOR AND IAM STRUGGLING TO COMPLETE MY GRADUATION IN THIS FAMILY STIATUATION. | | | | | | |
| **8.2Tell us some things about yourself, your strengths/weaknesses, interests/hobbies:**  **I**AM A QUICK LEARNER AND I ADOPT MYSELF TO ANY SITUATION AND AS I AM FROM A VERY BAD FAMILY SITUATION ,SINCE I FACE MANY STRUGGLES AND PROBLEMS FROM MY CHILDHOOD SO I CAN EASILY MANAGE ALL THE PROBLEMS . I HAVE A GOOD LEADERSHIP QUALITY.MY HOBBIES LIKE RIDING MOTORCYCLE,DRAWING PENCILS POTRATITS.AS MY FATHER HAVE NO SONS SO HE GROWN UP ME LIKE A SON ,HELPED ME TO LEARN DRIVING BIKE,CAR AND ALL ASPECTS OF LIFE AND GOW TO FACE ALL PROBLEMS. | | | | | | |

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| **8.3What is your ambition in life?**  MY AMBITION IS TO MAKE PROUD OF MY PARENTS AND OE WHO ALL HELPED ME TO GROW ,BECAUSE EVERYONE DOESNOT HAVE CHANCE TO PROVE THEMSELVES SO I WANT TO MAKE IT .I WANT TO BECOME A DATA SCIENTIST,WHO WILLL BE IN AN TOP MC COMPANY. |
| **8.4What is the kind of support you need in your journey to achieve your ambition.**  ONLY SUPPORT I NEED IS FINANCIAL SUPPORT,BECAUSE MY FATHER HAD MADE JOINED ME IN COLLEGE AND PAID FEES FOR MY STUDIES TILL MY 2ND YEAR,AFTER HE DIED,NOW IAM STRUGGLING TO PAY FEES AND COMPLETE MY GRADUATION,SO IF YOU HELP ME IT WOULD BE THE GREAT THING FOR ME AND MY FAMILY. |

Place:pollachi

Date:02.03.2025

Attachment along with the mail:

Please attach (scan copy) the following documents with the mail. Mail attachment size should not exceed 5MB

* Latest Passport size photo
* **10th and 12th Mark sheet**
* Income Certificate
* Attach statement of fee details from college & copy of the receipt of last paid
* Bank passbook - FrontPage
* Proof of admission: Fees receipt paid, ID card, Bonafide Certificate

Send the completed forms along with attachments to [scholarship@ammfoundation.org](mailto:scholarship@ammfoundation.org)

For any queries, contact: 044-24320347