

STUDENT APPLICATION  
(MINORITY WELFARE SCHOLARSHIP SYSTEM)

**Fresh**

**For official use only**

Sl No of application	Year	Course	Whether approved

**Student ID:** T2013FgjM02006

Affix a self  
attested passport  
size photograph

**1.Full name(in block letters)** : **MANDHARA IQBAL HUSENBHAI**

**2.Father's name/Husband's name** : *Mandhara husenbhai ali*

**3.Mother's name** : *mandhara mariyabai husen*

**4. Domicile State/UT (State/UT which the student belongs to)** : *Gujarat*

**5. Address for correspondence:**

House No. & Street Detail	<i>numbar area bidada</i>
City/Town/ Village & P.O.	
District	<i>KUTCH</i>
State	<i>Gujarat</i>
Pincode	<i>370465</i>

**6. Permanent address(please enclose residential certificate from concerned state government authority):**

House No. & Street Detail	<i>numbar area bidada</i>
City/Town/ Village & P.O.	
District	<i>KUTCH</i>
State	<i>Gujarat</i>
Pincode	<i>370465</i>

**7. Date of birth (Please enclose certificate)** : *12-May-1994*

**8. Whether male or female** : *Male*

**9. Religion** : *Muslim*

**10. Nationality** : *Indian*

**11. Aadhaar Number** :

**12. Details of educational qualifications from matriculation/SSLC/SSC onwards (Please enclose certificates attested by a gazetted officer):**

Examination passed	University/Board/Institution/Council of Examination	Main Subjects	Year of Passing	Percentage marks	Division /Class/ Grade
null			2012	64.0000	

**13. Details of course for which scholarship is being sought:**

Name of the technical/professional course:	CA( Chartered Accountancy )
Duration of course	5
Academic year	2013-2014

**14. Basis of admission in professional/technical course (whether on the basis of qualifying competitive examination or on other grounds. Please give details):**

cpt

**15. Details of college/institution:**

(i) Name of the college/institution where admitted:

*The Institute of Chartered Accountant of India.*

(ii) Address of college/institution:

(iii) Telephone no:

(iv) Fax no:

(v) E-mail address:

(vi) Is the college/institution recognized. If so the name of authority which has recognized the institution :

*AICTE NEW DELHI*

(vii) To which university is it affiliated/does it have deemed university status :

**16. For renewal of scholarship:**

Name of examination passed	Year	Marks Obtained	Full marks	% of marks

**17. Total Annual course fee: 9500.00**

(Break up of course fee such as tuition fee, library fee, examination fee etc. other than refundable deposits):

Sl.No.	Item	Annual fee
1.	Tuition Fee	9000.00
2.	Library Fee	0.00
3.	Examination Fee	500.00
4.	Other Non Refundable Fee	0.00
	Total	9500.00

**18. Details of bank account of student:**

Name of the payee (as in the bank accounts)		
Name of the Bank		STATE BANK OF INDIA
Bank Branch	Full Address	Bunder Rd Mandvi Kutch
	District	
	State	
	Pin code	
Branch Code number		
Bank Account Number		681770
Bank Account Number in words		
Type of bank Account(Saving/Current)		
IFSC code of the Bank		SBIN0060167
Mode of Electronic transfer available in the Bank – ECS/RTGS/NEFT/CBS/code number (if any);-		

**19. Annual Income of parent/guardian of the student: Rs. 72000**

(specimen form of declaration of annual income is given at Annexure which is to be signed by the parent/guardian of the student and enclosed alongwith the application. In case parent/guardian are employed, income certificate from the employer may also be enclosed)

**Documents to be enclosed with the application ( To be disabled in online version, student to fill manually, after taking print-out )**

**Documents to be enclosed**

1. Attested certificates of educational qualification as filled up in para 12.( Certificate not required to be enclosed
2. Income declaration - to be given by the Parent /
3. Proof of permanent residence ( Certificate not required to be enclosed for renewal application if address has
4. Receipt in acknowledgement of scholarship in the
5. Course Fee Receipt

Attached	Not

**Declaration :**

(i). I hereby declare that the information given above is correct.

(ii). I am not availing any other scholarship for this purpose from any other sources.

(iii). I shall abide by the terms and conditions for sanction of the merit cum means based scholarship.

(iv). I undertake, that if at any stage, it is found to the satisfaction of the sanctioning authority in the Ministry of Minority Affairs that the information given by me is false or if I violate the terms and conditions of the scholarship, the scholarship sanctioned to me, may be cancelled and the entire amount of scholarship will be refunded by me or recovered from me, apart from liability for such penal action as warranted by law.

**Date**

**Signature of the candidate**

**BEYOND THIS POINT TO BE FILLED IN BY THE INSTITUTION.**

**Contd...**

**(To be disabled in online versio, Institution to fill manually, after student submits hard copy )**

**Basic Information**

(i) Name of the college/institution where admitted:

(ii) Address of college/institution:

(iii) Telephone no:

(iv) Fax no:

(v) E-mail address:

(vi) Is the college/institution recognized. If so the name of authority which has recognized the institution :

(vii) To which university is it affiliated/does it have deemed university status :

(viii) Name of the Head of the Institution.

**(NOTE:- sr nos. (i) to (v) above to be reflected from para -15 of the student's application. Sr nos. (vi) to (vii) are optional fields. )**

**Bank Details**

**Details of bank account of institution/college:**

(ix) Name of the payee (as in the bank accounts)

(x) Name of the Bank :

(xi) Bank Branch \_\_\_\_\_(Full address) :

State\_\_\_\_\_, District\_\_\_\_\_, Pin\_\_\_\_\_

(xii) Branch Code number (Leave one space wherever required )

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(xiii) Bank Account Number (Leave one space wherever required )

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(xiv) Type of bank Account : \_\_\_\_\_(Saving / Current)

(xv) MICR code of the Bank (Leave one space wherever required )

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(xvi) Mode of Electronic transfer available in the Bank – ECS/RTGS/NEFT/CBS/code number (if any);-

### **VERIFICATION OF INFORMATION IN RESPECT OF STUDENT**

#### **Verification/information to be furnished by the Head of institution/college:**

It is certified that the information filled in the above mentioned columns by Shri/Smt/Kumari MANDHARA IQBAL HUSENBHAI S/O, D/O Shri/ Mandhara husenbhai ali who is admitted in CA( Chartered Accountancy ) course for the for the academic session 2013-2014 in The Institute of Chartered Accountant of India. college is correct. He/she is a hosteler/day scholar of the college.

**(Blank fields to get reflected automatically as filled in by the applicant in different**

**In case the insformation filled in these column is not correct, then the Institute should indicate that seperately below**

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#### **For Renewal of scholarship:**

It is certified that the above mentioned student has passed the \_\_\_\_\_ examination for \_\_\_\_\_(year) and has attained \_\_\_\_\_% marks.

It is also certified that the student has not changed the course of study and /or the institution of the study for which the scholarship was originally awarded/has changed the course of study and/or institution with prior approval of the state government ( Please strike out which is not applicable )

**1. Please ensure the information given by you is factually correct. In case of any dicrepancy noticed later, your application is likely to be rejected.**

**2. Mailing address of state Departments is available in the Home Page under the tab "list". Please forward duly signed hard copy in respective address.**

**Date:**

**Place:**

**Signature of head of the institution / college**

**With official seal**

**DECLARATION OF FAMILY INCOME**

I Mandhara husenbhai ali (Father /Mother /Guardian) of MANDHARA IQBAL HUSENBHAI (Name of student) who is studying in CA( Chartered Accountancy ) II year hereby declare that my annual income from all sources is Rs./ 72000.00 if at any stage,it is found that the information given by me is false/not true,all benefits given to the student under the scephme of Merit cum means based scholarship to the student belonging to minority communities could be with dran and legal action as deemed fit, may be taken against me or my ward.

Signature

Residential Address

numbar area bidada

Date:

(Father/Mother/Guardian)

KUTCH  
Gujarat  
370465

[This is a draft format which the State government/UT administration may modify/amend to suit legal requirements]

**Postal Adress:**

Director of Developing Caste Welfare Block  
No. 4, 3rd Floor ,Dr. Jivaraj Mehta  
Bhavan,Gujarat State, Gandhinagar-382010.

## **Eligibility criteria**

- (i) Students, who have got admission in a recognized college to pursue technical/professional courses, on the basis of a competitive examination
- ii) Students, who have got admission in a recognized college to pursue technical/professional courses, without facing any competitive examination, will also be eligible for scholarship. However, such students should have not less than 50% marks at higher secondary/graduation level. Selection of these students will be done strictly of merit.
- iii) A scholarship holder under this scheme will not avail any other scholarship/stipend for pursuing the course.
- iv) The annual family income of the beneficiary/parent or guardian of the beneficiary should not exceed Rs.2.50 lakh per annum from all sources.
- v) A student residing in a particular State/UT will be entitled for scholarship under the quota of that State/UT only irrespective of his place of study.

## **How to Apply**

Applications in the prescribed format may be submitted to the Secretary of the, deptt. of the concerned State Govt/UT administration, dealing with minority welfare, through the institutions where the students are pursuing technical/professional courses. The student must submit their applications to the state which he/she belongs to and not to the state where the institution where he/she is studying, is located.