

ERP Software & Mobile Apps

Plot No. 19, Sai Enclave, Dwarka Sec - 23, New delhi 110077

SC	CHOLARSHIP / CONCESSION APPLICATIO	N FORM		FAMILY	
Sr. No.			ession :	FAMILY	
Admisson No To be filled by office					
Class:			oll No.		
Personal Details of The Student :					
1. Name					
2. Gender Male - Female - Other -					
3. DOB Date Month Year In Words: (Attach Date of Birth Certificate issued by competent Authority)					
4. Details of Parents of The Student :					
Details	Mother Father				
Name					
Educational Qualification					
Postal Address (Permanent)					
Phone/Email					
Occupation					
Annual/Monthly Income					
Aadhar No. (Attach Proof)					
6 . Caste / Category (Attach Proof) General SC ST OBC EWS					
7 . No. of Siblings in the School No. of Children in the Family					
8 . Aadhar No. (Attach Proof) Nationality				Religion	
9 . Name and Address of the last attendend school :					
10 . Class last attended :					
11 . Marks Obtained in last Examination in Percentage :					
DELCLARATION					
The student's scholarship/concession will be stopped with immediate effect, if the information provided by the parents are found false/misleading.					
Date					
Place	Signature of Parent(s) / Guardian		onship with candidate	Signature of Principa	
For Office Use Only					
S					
Sr. No.	Class			Session	
Student's Name				Roll No.	
Father's Name Mo			Nother's Name		
The student is given the% of the total amount of the fee of every month as scholarship/concession. In every case/circumstance, the school will decide on the amount of scholarship/concession.					

Date Signature of Principal