

**Electronic Clearing Service (Credit Clearing)
(Model Mandate Form)**

(Investor/Customers's option to receive payment through Credit Clearing Mechanism)
(Scheme Name and the Periodicity of payment)

1. INVESTOR/CUSTOMERS' Name : MILAN SARMAH

2. PARTICULARS OF BANK ACCOUNT

A. BANK NAME : STATE BANK OF INDIA

B. BRANCH NAME : NIT Silchar

ADDRESS : NIT Road, Fakiratilla, Silchar, Assam
788010

TELEPHONE NO. : 03842 233 806

C. 9 DIGIT CODE NUMBER OF
THE BANK & BRANCH : 788002004

(Appearing on the MICR Cheque issued by the Bank)

C.1. IFSC Code of Bank : SBIN0007061

D. ACCOUNT TYPE : Saving Account
(S.B Account/Current Account or
Cash Credit with Code 10/11/13)

E. LEDGER NO./LEDGER FOLIO NO. :

F. ACCOUNT NUMBER : 40389228301
(As appearing on the Cheque book)

G. Attached document for verification of Bank particular :

3. DATE OF EFFECT

I hereby declare that the particulars given above are correct and complete of the transaction is delayed or not effected at all for reasons of incompleten or incorrect information. I would not hold the user institution responsible. I have read the option invitation letter and agree to discharge responsibilitybexpected of me as a participant under the scheme.

Date: _____
Signature of the Investor/Customer

Certified that the particulars furnished above are correct as per our records.
(Bank's Stamp)

Date: _____
Signature of the Authorised Official of Bank

DECLARATION AND UNDERTAKING
Undertaking from College

To,

CEO,
ONGC Foundation
Delhi

This is to certify that Mr./Ms. _____ S/o/D/o _____, is
the student of 1st year in _____ (Course) _____ (Stream/ discipline) _____ of
(college/ institution/ University) _____.

He/she got admission in the academic year _____ with admission/enrollment no. _____.

His/her DoB is _____. (DD/MM/YYYY).

Further, it is certified that the Student is not receiving any scholarship or financial assistance from any other source/
organisation for his/her education other than the state government reimbursement/ waiver off the component of tuition
fees, the same shall not be treated as a financial assistance/scholarship for ONGC's scholarship.

Date:

Place

Signature of the Principal/ In charge of the College/Institution with seal

Name:

Designation:

Mobile Number:

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