

VIDYASAGAR UNIVERSITY

Midnapore – 721 102 West Bengal

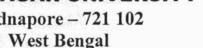
APPLICATION FOR THE AWARD OF THE FINANCIAL ASSISTANCE FROM VIDYASAGAR UNIVERSITY STUDENTS' WELFARE FUND

Subject	Class	Roll No	Session	
To The Dean of Students' Welfare Vidyasagar University Midnapore- 721102				
Widnapore- 721102				
Dear Sir,				
I beg to apply for the award of f			tudents' welfare fund	for session
		· · · · · · · · · · · · · · · · · · ·		
Date:		Signatur	e of the applicant	
 Name of the applicant (In Block Letters) 				
Father's /Mother's/ Spouse's Name	:			
3. Occupation				
4. Mailing Address (With pin code)	Nesij kope t gal plano			
5. Phone No.	desaglar eta está unida			
6. Nationality				
7. Religion	:			
8. Whether SC or ST (certific	cate is to be attached)			
9. Whether Physically Handi	capped(certificate is to l	be attached) :		
10. Have you enjoyed any other sch If Yes:	olarship / stipend? Either fro	om the University or fi	rom the Govt: Yes/No	
11. a) Name of the Scholarship b) Amount of the Scholars		attached) :		



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12. Have you enjoyed the Full free / Half free studentship of the University: Yes/N	12	. Have	you enjoyed	the Full f	ree / Half	free students	ship of the	University:	Yes/No
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a) Mention Full free / Half free

Amount of award

- 13. Annual income of Father/ Guardian Husband (income certificate is to be attached):
- 14. Are you BPL Card holder? (Document is to be attached): Yes / No
- 15. Details of educational qualifications:

SI. No	Examination(s)	Name of the Board/ Council / University		Subject(s)		Total Marks obtained	Percentage of Marks (%)
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2.							
3.	estimately large.	वस वस सरका मुक्त					ji con
4.					mary Person	ad-Ne [®] mos	4 3

Declaration by the student.

I hereby declare that the above information given in the format is true and correct to the best of my knowledge and belief.

I shall bear the responsibility for any type of deviation from the information mentioned above.

	(Signature of the candidate)
Date:	