## RENEWAL APPLICATION FOR CENTRAL SECTOR SCHOLARSHIP FOR THE YEAR .....

1	Applicant Name:	Date of Birth:	Reli	gion:	Catego Gen/O	ry: BC/SC/ST	Income:	
2	Have you received the initial scholarship amount of Rs.10000/- in your Bank						Yes/No	
3	Have you changed		Yes/No					
	Name of the Institution where course being pursued:							
	Address of the Inst							
	Type of Institution							
4	Have you changed the Course of Study					Yes/No		
	Name of the Course							
	Subject of the Course							
	Course Approval	Type of Progran	nme	Mode of Stu	ıdy	Pattern of Examination:		
	1. AICTE	1. Degree		1. Regular classes		1. Annual		
	2. UGC	2. Diploma cour	se	2. Evening classes		2. semester		
	3. Others	3. Integrated		3. Distance Mode		3. Tri-mester		
		degree Course		4.Correspondence		4. Bi-annual		
		4. Masters Degr	ee	5. Non-Collegiate		5. Others (Pl.specify)		
		5. UG Profession	6. UG Professional 6. Open Learning		rning			
		6. Polytechnic		7. Other				
		Others (pl.speci	fy)	(Pl.Specify)				
5	Aggregate marks obtained in Annual examination First/second Year/Aggregate							
	of 2 Semesters (If grades have been awarded, write its equivalent percentage)							
	Year in which applicant applied for CSS fresh and Registration id:							
	Scholarship Type: Renewal 1, 2, 3, 4 –						Academic Year-	
	Details for communication							
6	Address for Correspondence:							
	Pin:							
	Tel No. with STDC	ode:		Mobile No:	Mobile No:			
	E-mail ID							
7	Is the candidate in receipt of any other relationship  Yes/No							
	Particulars of Savings Bank Account:							
	a. Account Number:							
	b. Name of the Bank							
	c. Address of the Bank							
	d. KTGS: NEFT:IFSC code							
	(11 digit Code of the Bank							
	e. Aadhar Number							

l,	(Name of the Applicant) certify that the						
statement made by me in this form is correct. I declare	that as I receive this scholarship, I shall devote						
my full time to the course of study. I shall maintain goo	od discipline and not indulge in ragging activities						
and that I shall not receive another stipend/scholarship from any other source.							
	Signature of Candidate						
VERIFICATION OF THE FORM BY THE HEAD OF THE INSTITUTION/COLLEGE							
This is to certify that	(Name of student) S/o						
enrolled in(Name o	of institution) in(name of Course)						
hae passed in all the subjects in the Semester/Annual e	examinations held in(Month & Year) in						
the First/Second year of the Course and has scored not less that 60% marks. He/She has maintained not							
less than 75% attendance, good discipline and has not involved in ragging activities.							
Place:	Signature of Head Institution						
Date:	Name & Designation						
	Name & Designation						
	Tel . & Mobile No.						
	-						