

Renewal Application Number: (For Office use)

GOVERNMENT OF TAMILNADU

<u>DIRECTORATEOF BACKWARD CLASSES / DIRECTORATE OF MOST</u> BACKWARD CLASSES & DENOTIFIED CLASSES WELFARE

SCHOLARSHIP APPLICATION FORM – RENEWAL - FOR STUDENTS STUDYING IN IIT, IIM, IIIT, NIT AND CENTRAL GOVERNMENT UNIVERSITIES – 2024-2025

All details asked below should be clearly filled up by the applicant and no column should be left blank

Affix a recent stamp size photograph here duly signed

A. PERSONAL DETAILS				
1.	Name of the Applicant	:		
2.	Name of the Father / Mother / Guardian	:		
3.	Occupation of the Father / Mother / Guardian	:		
4	Details of movable/immovable properties of the Father / Mother / Guardian a) House (own/rental) b)Vehicles owned (Four Wheeler)			
5.	Date of Birth (dd-mm-yyyy)			
6.	Age	:		
7.	Gender: Male / Female / Third Gender	:		
8.	Religion	:		
9.	Community: BC / MBC / DNC	:		
10.	Caste	:		
11.	Native District	:		
12.	a)Annual Family Income: (Need to attach Annual family income certificate)	:		
	b)Source of Other Income, if any (Rent received / Income from agriculture lands)			
13.	Aadhaar Number	:		
14.	E-mail id	1:		

15.	Mobile No	:	
16	Permanent Address (With District & pin code)	:	Address for Communication (With District & pin code)
17.	Have you studied 6 th standard to 12 th standard in Government School of Tamil Nadu(Yes / No)		
18.	If Yes, Have you received Scholarship from Higher Education Department of Government of Tamil Nadu (Yes/No)		
	B. COURSE D	ET.	AILS
19.	Name & full postal address of Institution with pin code	:	
20.	Name of the Scholarship Nodal officer/Email id of the Institution/Contact No. of Institution	:	
21.	Website address	:	
22.	Sanctioned amount of scholarship under this scheme for the year 2023-24. (Rs.)	:	
22	Date of Credit	:	
23.	Name of the Course	:	
24.	Duration of the Course	:	
25.	Current Batch Year (I, II, III, IV) (2024-25)	:	
26.	Student Admission No.	:	
27.	Hosteller: Yes / No	:	
	a. If yes: Paid hostel / free hostel	:	
	b. Hostel Name& Full address	:	
	c. Date of Joining	:	
	d. Date of leaving	:	
	e. If Paid Hostel mention the monthly hostel fee & other expenses (in Rs.) *(Need to attach fees paid receipt copy)	:	Month Amount Paid (Rs.)
			Total Amount
L		1	ı viai Amvulli

To be Filled by Hostel Administrative Authority							
Date:	The Hos	stel details furni	shed under Sl	. No. 27 are	e veri	fied and found cor	rect.
Seal:							
			Signature of	of the Hoste with d		ministrative authori ation	ity
			C. FEES I	PARTICU	LAR	<u>S</u>	
	-	y the applicant	for the year 20	24-25(Plea	se m	ention only Non-l	<u>Refundable</u>
Amour	<u>nt)</u>						
Semester /Quarter		Tuition Fees (Rs.)	Special Fees (Rs.)	Exam Fees (Rs.)		Other Compulsory Fees (Rs.)	Total (Rs.)
Total (Rs.)						
	5. If Bre		_	_	_	for all semesters of cture brochure sho	-
Place: (Date: (Designation Seal)		Office seal	Name & Signature of the Head of Institution			9	
D. <u>BANK ACCOUNT DETAILS(Please furnish the applicant bank details correctly)</u> (Kindly enclose the First page of bank pass book)							
29.	Studen	t Bank Accoun	t Details	:			
	a)	Bank Name		:			
	b)	Branch Name		:			
	c)	Student Bank	Account No	:			
	d)	IFSC Code		:			
	e)	MICR Code		:			

1.			s) (Self- attested)				
	Bank Passbook first page	:					
2.	Fees Paid receipt copies for the year 2024-25 (All the semesters for that year)	:					
3.	Self –Declared Annual Family Income Certificate	:					
	Declaration of the						
I,		••••					
		•	, ·				
am S	Studying in	••••					
(Name	of Institution & course & Year) and the de	tail	s filled in this application are true to				
the bes	st of my knowledge and I declare that I an	no	t receiving any other scholarship /				
Minor	ities - Merit cum Means Scholarship / Sc	chol	arship from Higher Education of				
Gover	nment of Tamil Nadu/ stipend / financia	al a	ssistance from Institution / other				
Gover	nment / PSUs / any other agencies						
	I am aware that a field inspection w	ill b	e conducted by the Govt. of Tamil				
Nadu :	for verification of genuineness on my scho		•				
	·		• ••				
		the details furnished above were incorrect in future, the scholarship granted to me					
could be withdrawn and legal action as deemed fit, may be taken against me.							
	be withtrawn and legal action as decined	111, 1	nay de taken against me.				
	be withtrawn and legal action as decined.	111, 1	nay de taken against me.				
	be withtrawn and legal action as decined.	111, 1	Signature of the Student with date				
	Bonafide Certif		Signature of the Student with date				
1.	<u> </u>	icat	Signature of the Student with date				
1.	Bonafide Certif	fica t	Signature of the Student with date				
	Bonafide Certification Certified that the above furnished details	are	Signature of the Student with date te found true with reference to the other scholarship / Minorities - Merit ligher Education of Government of				
2.	Bonafide Certification Certified that the above furnished details certificates and records kept in this institute Certified that the student is not in receipt of cum Means Scholarship / Scholarship from Tamil Nadu/stipend / financial assistance from	are any m H	Signature of the Student with date te found true with reference to the other scholarship / Minorities - Merit ligher Education of Government of nstitution/ other Government / PSUs				
2.	Bonafide Certificates and records kept in this institute Certified that the student is not in receipt of cum Means Scholarship / Scholarship from Tamil Nadu/stipend / financial assistance from / any other agencies Certified that the student is eligible to avail	are any m H	Signature of the Student with date te found true with reference to the other scholarship / Minorities - Merit ligher Education of Government of nstitution/ other Government / PSUs				

For Office Use
Sanctioned scholarship amount of Rs /- under the scholarship scheme of TN Students studying in IIT, IIM, NIT, IIIT & Central Universities.

SELF DECLARATION OF FAMILY INCOME

I, Son / Daug	ghter of
Resident of	
do hereby solemnly affirm and declare that my an	nual family income is Rs
	(in figures) (in words).
I certify that the above information given by me is	s true. In case of false declaration by me, the
scholarship awarded to me may be recovered and	legal action in accordance with Law may be
initiated.	
Date:	Signature
Place:	Name