## FRESH APPLICATION FORM

Post-Matric Scholarship to Other Backward Classes Students (Sponsored by the Ministry of Social Justice & Empowerment, Government of India)

То	The I	Director									
	The Director, Welfare of Minorities and Other Backward Classes,										
		rnment of Man para, Imphal –							port size Photo		
					PA	ART-A					
Sir,	Lwie	h to offer my	alf as a as	andidata for	organd o	f Doot Matria Saha	Jordhin to Other D	oolaword	Classes (OPC)		
Stude	I wish to offer myself as a candidate for award of Post-Matric Scholarship to Other Backward Classes (OBC) Students for the academic session as per my particulars are given below: -										
1.		•									
2. 3.		,		,							
4.	Name of OBC :    5. Religion										
6. 7.							ore not relevant)				
7.	Particulars of father & mother/guardian/husband : (Strike off whichever are not relevant)  (a) Full name (in block letters):										
	(b) Full name of mother										
							(e) Total Aı				
8.		•		_							
	(a) Name of previous Institution:										
9.											
	(a)	Name of preser	nt school/co	ollege/institu	tion with	full postal address	:				
							class: tion Number & Yea				
							osteller				
10.		(11) Room Nun ils of Board/Co					arding fee				
Sl.N		Exam. Passed	Div. With %	Roll No.	Year	School/College/ University	Board/Council/Ur	niversity	Remarks		
1.											
3.											
4.											
	•										
					plied/rec		nip/stipend from any				
							tatement made by awn by me, (4) In				
arisin	g in t	he award of scl	holarship, I	further give	e my con	sent to abide by the	e decision of the go	overnmen	t which will be		
				ove stateme	nts are tr	ue and correct to the	e best of my knowle	dge and b	pelief.		
				( <b>EO</b> I	) OFFIC	CIAL USE ONLY)	( Full si	ignature o	of the applicant)		
_	HSL	C Roll No.		Year	_	Division	_	В	oard		
, [	A 1				]		L				
1. 3.							to 5 Year				
6.											
REJECTED/ACCEPTED											
Reason(s) for rejection: (1) Incomplete entries (2) wrong entries (3) high income (4) study break (5) double applications (6) Absence of educational/Income/OBC/age/study break/unemployment certificate (7) Absence of applicant's/Head of Institution's signatures.											

Signature of Supervisor

Countersignature of DDO

Signature of Dealing Assistant

## PART -B

	( To be filled in by the Head of the Institution where the applicant is studying )
1.	Certified that the applicant is at present studying in
effe	ect from (date of admission ) For the academic session under
adn	nission number Class Roll No
2.	The duration for the whole complete course is from to to
3.	Likely date, month and year of the annual examination for the class in which the applicant is presently studying:
	Date Year Year
4.	This institution is affiliated to
	India/State Government of
5.	Name of the nearest State Bank of India branch where payment is desired
	Bank Code No
6.	The undisbursed amount lying with the Institution on account of scholarship, fees etc, will be refunded to the Govt.
	account of the awarding authority.
7.	Further certified that the statements made by the applicant in this application form are correct to the best of my
	knowledge and I recommended the applicant for award to Post-Matric Scholarship for the academic session
8.	Particulars of all non-refundable compulsory fees paid by the applicant are as follows:
	(i) Tuition Fee Rs
	(iii) Games Fee Rs
	(v) Medical Fee Rs
	Total Rs
	e:
Plac	ce: (Signature of the Head of Institution with seal)
	Name in block letters:
	Full postal address of the institution:

Note: (I) Stamped signature will not be accepted, (2) Full name in block letters of the head of institution is compulsory, (3) Official seal of the head of Institution and round seal of the Institution are compulsory, (4) The application form will be rejected if declaration is found incomplete or filled in by the applicant or if there are signs of overwriting/erasure.

## INSTRUCTIONS FOR FILLING UP OF APPLICATION FORM

- 1. This form is intended for fresh applicants and for those who were in receipt of scholarship in the previous year but have completed the course, and for studying the next higher class/course. Applicant should fill up the form in full correctly and must affix his/her passport size photograph with his/her signature thereon in the space provided in the first page. Enclosed documents will not to be returned. The directorate will not be responsible for any loss of application form/documents.
- 2. Applicant is warned that if he/she gives (false statements/declaration/documents etc. or otherwise obtain scholarship through fraudulent means, he/she will be blacklisted and debarred from scholarship forever under this or any other scholarship scheme. The scholarship amount if already paid will also be recovered.
- 3. Students having a study break of not more than 3(three) years should furnish a certificate stating the reason of break in his/her academic studies from the present head of the institution. Students having a study break of more than 3(three) years will not be eligible for this scholarship under any circumstances.
- 4. Enclose (a) attested Photostat copies of certificate/marks sheets/admit cards of examination passed as at 10 of Part A. (b) income/occupation certificate of father/guardian/husband in original issued by the competent authorities/executive magistrates, (c) OBC Certificate of the competent: authorities/executive magistrates, (d) Certificate in support of claim as hosteller as at 9 (g),(h) of Part-A (if candidate is hosteller). Verified by a Gazetted Officer (e) break certificate (wherever applicable (f) Mark sheet of the previous academic year is compulsory (g) Certificate of unemployment in State/Central Govt. or Public undertakings.
- 5. Incomplete entries, wrong entries, high income, double applications, non-furnishing of the required certificate and documents, and absence of applicant's/head of Institution's signature will be rejected.
- 6. Direct individual submission of the application form will not be accepted.
- 7. The decision of the Awarding Authority is final.

## TO WHOM IT MAY CONCERN

This is to certify that Shri .....

and Smt.								
Shri		an inhabitant						
of								
Place		Signature:						
Date	Full Name in block letter:							
	Designation & name of Office :							
	Seal							
	Present Address of Posting:							
1	10 00 100							

<sup>\*</sup>N.B. To be certified by a State/Central Govt. Gazetted Officer. Incomplete/wrong entry of the be considered