

## Application for Free Studentship (2020-2021)

Name of the Appl	icant:	
Address:		
Course:	Major:	Semester:
Year of Passing (Last Examination):		Percentage/GPA:
E-mail ID:		Mobile No:
Family Income:		
	ald not exceed Rs.4000/- per month Govt. Officer or Secretary of Munici	n, income certificate issued by BDO or any equivalent ipality etc.)
Reason for Apply	ing Free Studentship:	
At present I do	not avail any other finar	tion provided above are true and correct. ncial benefit. Subsequently if I avail any rity. I enclose the following document.
	copy of mark sheets of all p	previous examinations
Signature of the S	tudent	
Remarks of the H	OD:	
Signature of Head	of the Department with Rubb	per Stamp
Remarks of the D	ean of Students:	
Signature of Dean	 of Students with Rubber Star	Date: