

## Application for Free Studentship (2016-17)

Applicant's Name:	
Address:	
Major:	Semester:
Year of Passing (Last Examination):	Marks:
E-mail ID:	Mobile No:
Guardian's Occupation:	
Guardian's Monthly income:	
(Family Income should not exceed Rs.4000/- per monti equivalent competent Group-A Govt. Officer or Secretar with application)	
Reason for Applying Free Studentship:	
<b>Declaration:</b> I hereby declare that informat At present I do not avail any other finant benefit I shall inform the University Author.	cial benefit. Subsequently if I avail any
<ul><li>i) Photocopy of mark sheets of all printing</li><li>ii) Income certificate of parents</li></ul>	revious examinations
Signature of the Student	
Remarks of the HOD:	
Signature of Head of the Department with Rubbe	er Stamp
Remarks of the Dean of Students (whether the ap	oplicant is hostel student or not):
Signature of Dean of Students with Rubber Stam	Date: