

Application for Student Aid (2019-20)

Name of the App	licant:	
Address:		
Major:	Course:	Semester:
Year of Passing (Last Examination):		Percentage/GPA:
E-mail ID:		Mobile No:
Father's Name:		
Mother's Name:		Family Income:
	ould not exceed Rs.4000/- per more transfer or Secretary	nth, income certificate to be issued by BDO or any of Municipality etc.)
Reason for Apply	ring Student Aid:	
benefit I shall in i) Photo	•	ncial benefit. Subsequently if I avail any rity. I enclose the following document. orevious examinations
Signature of the	Student	
Remarks of the H	OD:	
Signature of Head	d of the Department with Rubb	per Stamp
Remarks of the D	ean of Students (whether the a	pplicant is staying in hostel):
Signature of the I	Dean of Students with Rubber S	Date: