

FREESHIP APPLICATION

Name of the applicant	:	
Class	: Roll No:	
Gender	:	
Permanent Address	:	
Contact No	: Mail Id:	
Occupation of parents	: Father: Mother:	
Contact No	:	
No. of Siblings	:	
Annual income:	: Rs	
Religion & Community	:	
Do you get any other school	larships/Stipends from other sources? If yes, mention the an	nount and
the source	:	
Percentage of marks obtain	ned in last University/ Board Examination:	
Bank Account Number:	IFSC Code:	
Account holder's Name:		
Bank & Branch Name:		
Mention your financial bac	ckground or the reason for applying the Freeship	

Name and Signat	cure of the Student:		
_	nts to be attached:		
	rtificate/Ration card		
	the previous examination		
Front page	of the Bank Passbook		
	FOR OFFICE (USF	
	1011102	7.5 2	
Application recei	ived on :		
Application recei			
Interview done or	n :	or:	
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