



MARIAN COLLEGE
KUTTIKKANAM
AUTONOMOUS
MAKING COMPLETE

MERIT SCHOLARSHIP APPLICATION

Name of the applicant : -----

Class :----- Roll No: -----

Gender : -----

Department : -----

Permanent Address : -----

Contact No : ----- Mail Id: -----

SCPA/ SGPA : ----- Grade: -----

Percentage of Mark : ----- Qualifying Semester: -----

Account No :-----

IFSC Code :-----

Account holders' Name : -----

Bank & Branch Name :-----

I, ----- certify that all the particulars given above are true to the best of my knowledge and belief. If found incorrect at any time, I will be personally liable to refund the whole amount.

Name and Signature of the Student :

Copy of documents to be attached:

- Mark list
- Front page of the Bank Passbook

Recommendation from the Faculty Advisor

I have verified the application and found that the candidate is eligible for the Merit Scholarship.

Name of the Faculty Advisor: ----- Signature: -----

FOR OFFICE USE

The Scholarship Committee has verified the applicant's eligibility and approved the request for the Merit Scholarship.

Amount approved : Rs. -----

Faculty in charge of scholarships : -----

Signature :-----

Approved by : The Principal, Marian College Kuttikkanam

Signature :-----

Date :