



# DIRECTORATE OF MINORITY WELFARE

Vikhas Bhavan, 4<sup>th</sup> Floor, Thiruvananthapuram-33

## C H Muhammedkoya Scholarship 2016-17(Fresh)

Affix recent  
passport size  
photo

1	Full Name ( <i>In Capital Letters</i> )		
2	Name of Father/Husband/Guardian		
3	Address	i) House No /Name ii) Street / Locality iii) City/Town/Village iv) Post Office v) District /Pincode	
4	Phone Number		
5	Age & Date of Birth		Male <input type="checkbox"/> Female <input type="checkbox"/>
6	Sex		
7	Aadhar Number		
8	Annual Income of Parent/Guardian		
9	Details of course based on which scholarship is being sought:	i) Examination Passed ii) Year of Passing iii)Percentage/Grade	
10	Details of Present Course and Institutions	i) Name of Course Joined ii) Year of study iii) Name of the Institution,Address, Phone	
11	Whether Hostler ?		Yes <input type="checkbox"/> No <input type="checkbox"/>

12	Details of Bank Account	i) Name of Account Holder ii) Account Number iii)Name of the Bank iv)IFSC Code v)Branch Code and Address	
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**Declaration**

- i) I hereby declare that the information furnished above is correct to the best of my knowledge and belief.
- ii) I am not availing any other Scholarship for this purpose from any other sources.
- iii) I shall abide by the terms and conditions for sanctioning of the Scholarship.
- iv) I understand that if at any stage ,it is found to the satisfaction of the sanctioning authority that the information given by me is false or I have violated the terms and conditions of the scholarship, the scholarship sanctioned to me, may be cancelled and the entire amount of scholarship will be refunded by me ,apart from liability for such penal actions warranted by the law.

Signature of Candidate

Place:

Date:

**Certificate by the Head of the Institution**

It is certified that the information filled in the above mentioned columns is by  
 Shri/Smt/Kumari.....S/o D/o W/o ..... is  
 admitted for.....course in  
 ..... college is correct.

He/She/ is a student of this college.

Signature of head of  
 the Institution/College  
 with official seal

Place:

Date: