

ANNEXURE - I

APPLICATION FORM
(BANISHREE - A Scheme of Scholarship for
Physically Challenged Students)
(To be filled in by the Candidates)

For the year

Name in full
(In Block Letter)

Address
Village/Ward P.S.
G.P. Block/NAC/Municipality
District

3. Category of Disability : OH/MI/WH/MRUCP
(Pl Tick whichever is applicable) (✓)
4. Are you a citizen of India ? (Pl. Tick) (✓) : Yes/No
5. Whether Scheduled Caste/Tribe/OBC/General :
(Pl. Mention)
6. Male/Female (Pl. Mention) :
7. Date of Birth (Pl. Mention) :
8. Name and address of the father / mother / guardian
- 9 (a) Relationship with the guardian (if applicable) :
(b) Total monthly income of the parents / guardian :
10. Nature of Scholarship (Pl. tick) (✓) : (fresh / renewal)
- 11 (a) Have you ever received Scholarship under any : Yes/No
Other scheme (Pl. tick) (✓)

(b) If Yes, indicates :

(i) Class in which you received the scholarship :

(ii) Period for which you received such scholarship :

12. Mention :

(a) Class for which I am applying for scholarship :

(b) Academic year of such class :

(c) Date on which you got admission :

13. (a) If you are visually challenged students, indicate : Yes/No
If you have engaged a reader ? (Pl. tick) (✓)

(b) If you are Orthopaedically handicapped students :
being 75% and above disability indicate the mode
of transport.

14. Document attached :

(i) Income Certificate / Copy of BPL Card (Pl. tick) (✓) : Yes / No

(ii) Disability Certificate (Pl. tick) (✓) : Yes / No

(iii) Mark-sheet of last Exam. Passed (Pl. tick) (✓) : Yes / No

I declare that, I have not received (not receiving) any other financial assistance from State/Central Govt.

Signature of the Students

Date

Place

(To be filled in by Head of Schools / Colleges / Educational Institutions)

I certify that :

- The information furnished by the candidate (name
.....) have been verified & found correct.
- The school/institutions in which the candidate is studying is Government/recognized private school/institutions (pl. tick) (✓) whichever is applicable.
- The application is recommended.

Signature of Head of the School/Institution

Name

(In block)

Address

.....

.....

Date Place

(To be filled in by Sanctioning Authority)

I have verified the informations as furnished by head of the school/institution. I hereby sanction

Rs..... towards scholarship and Rs. towards

Reader's allowance/mobility support, thus totaling to Rs. Sanction order

No: / Dt

Signature with seal of
BDO/Sub-Collector