Annexure I

APPLICATION FORM (BANISHREE – A Scheme of Scholarship for Physically Challenged Students)

(To be filled in by the candidate)

For the year		
1. Name in full (In Block letter)		
2. Address		
Village/WardP.S.		
G.P		
Block/NAC/Municipality District		
3. Category of Disability	:	OH/HH/VH/MR/CP
(Pl. Tick whichever is applicable) ($$)		
4. Are you a citizen of India? (<i>Pl. tick</i>) ($$)	:	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 /guard	lian	
9. (a) Relationship with the guardian (<i>if applicable</i>)	:	
(b) Total monthly income of the parents / guardian	:	
10. Nature of scholarship (<i>Pl. tick</i>) ($$)	:	(fresh/renewal)
11. (a) Have you ever received Scholarship under any other scheme. (<i>Pl. tick</i>) ($$)	:	Yes/No

(b) If Yes, indicates :

(i)	Class in	which vo	u received	the	scholarship) :
(1)	01000 111	willion you	arecertea	circ	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 if you have engaged a reader? (<i>Pl. tick</i>) ($$)	:	Yes/No
(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*) ($\sqrt{$):Yes/No(ii) Disability Certificate (*Pl. tick*) ($\sqrt{$):Yes/No(iii) Mark-sheet of last Exam. passed. (*Pl. tick*) ($\sqrt{$):Yes/No

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

Signature of the students

Date	
------	--

(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 Rs	towards
Reader's allowance/mobility support, thus totaling to Rs	
Sanction order No	

Signature with seal of BDO/Sub-Collector