<u>GOVERNMENT OF HARYANA</u> <u>TECHNICAL EDUCATION DEPARTMENT HARYANA</u>

APPLICATION FORM UNDER SCSP SCHEME FOR FEE AND TRANSPORT FACILITY REIMBURSEMENT TO SCHEDULED CASTESSTUDENTS

Pr	2021-22 The candidates are advised to submit their application to the cincipal concerned of their institution not later than the notified st date FORM A: TRANSPORT FACILITY PART – A	Passport size Photograph with Signature of Candidate attested by HOD/Principal
1.	Name in full (in Block letters): Shri/Smt./Kumari	
2.	Aadhaar / UID No. (12 digit number)	
2	Father's/Husband's name:	
5.		
4.	Nationality:	
5.	Caste/Sub-Caste:	
6.	State where permanently settled:DistrictState	
	Residence Address	
7.	E-mail Address	
8.	Phone No.	
9.	Name and address of the guardian and relationship with applicant: Name	
	Relationship	
	Residence Address	

10. Name of the institution where student is studying

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	(a) Year of A	dmission	(b) C	Cours	e/Tr	ade							(c)	Cl	ass	/Se	me	este	r		
	(d) Tuition Fee	es Paid																			
	Name of	of		Act	ual	Fuiti	on f	iees	pai	d					Fi	xed	•		ate		
	Course/Class/S	Semester													(Con	Fee nm		e		
11	. Income Certificate	e (only par	ents in	come	e) fro	om S	DN	I/T	ehsi	ild	ar										
12	. Name of the bank	with addr	ess Bai	nk																	
	Account No.																				
	MICR/IFSC code	of Bank																			
13	8. Particulars of ex equivalent examin Any break in ed indicating also hov by an affidavit fro	ation (Plea lucational w he/she oc	ase atta career cupied	ach a' ' sho hims	ttest uld self/l	ed co be nerso	opie mei	es o ntio	f ce ned	rti I i	fica n 1	ate ren	s/n nai	nar rks	k s co	hee olur	ets. nn	•			
	Name of	Year	Wheth	ner pa	issed	or n	ot i	n	U	niv	vers	sity		E	Boa	rd		Rei	mar	rks]

Name of	Year	Whether passed or not in	University	Board	Remarks
	in				
Examination	which	case of last exam passed			
	taken	indicate percentage of			
		marks and division			
1	2	3	4	5	6
1.					
2.					
3.					

FOR RENEWAL CASES

(Strike off, if not applicable)

14. (a). Whether in receipt of scholarship under this scheme	
in the previous year, indicate	

 Ye	s/No	

(i) Name of the scholarship scheme

	1			1																
	1			1																1
	1			1																1

(ii)Courses of study for which scholarship was given

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(iii) Name of the institution in which the scholarship was awarded

15.	(i)	Co	urs	es	of	st	ud	y	for	• W	/hi	cł	n se	ch	ola	ırsl	hi	p i	S	no	W	de	si	rec	1								
	(ii)	C	las	s iı	1 W	vh	ich	I S	tuc	lyi	ng	; ti	his	y	ear	•		•											•	•			•
	(iii)	D	ate	of	jo	oin	ing	g t	he	in	sti	tu	tic	n																			
	(iv)) C	las	s R	lol	1 N	No.	•																									
	(v)	D	eta	ils	of	S	ch	ola	ars	hij	p a	lr	ea	dy	' av	ail	le	d u	ın	de	r t	he	sc	che	en	ne.							

Session		
Amount		

(vi) Total Fees Paid

Name of Course/Class/Semester	Actual Tuition fees paid	Fixed by State Fee Committee

(vii) Result of Examination

Passed Session/Semester		
% of Marks obtained		

16. (i) I/we hereby declare that I/we have read the regulations of the scheme and agree to abideby the terms and conditions of the award. I/we certify that the statements made in the application are correct and if any of them is found to be incorrect by the authority whose decision will be final and binding on me/us. I/we undertake to refund to the said authority on demand the entire amount of scholarship received by me/us or over paid to me/us failing which the said authority may recover the amount from me/us through whatever means it deem proper. That I have not claimed benefit under PMS of GOI for Scheduled Castes or from any other scheme.

(*ii*) *I/we further undertake that his/her application is being submitted for the above scholarship for first time for the present class.*

Date:

Place:

(i) Signature of applicant

(ii) Signature/left/right hand thumb impression of the parents/guardian

PART – B

(To be filled by the Head of Institution)

Certified that:

- (i) Information given by the applicant in Part-A has been checked and found correct /has been corrected in red-ink.
- (ii) The course in which the applicant in studying in this Institution is a post matric.
- (iii) The Institution is affiliated to _____University / Board and is recognized by the State Government of Haryana and that the applicant isstudying ______ course in this institution and the minimumqualification required for admission to that course is a pass in the ______ examination.
- (iv) Certified that no eligible students studying in the institution is left out for grant of Scholarship and this list may be treated as final.
- (v) Certified that the scholarship for the stipend holder named above have been regular in attendance and have confirmed to the rules under which their scholarship of their stipend are granted.
- (vi) Certified that the eligibility of the student have been rechecked and discrepancynoticed has been reported to the department / disbursing institute *vide* letter no.

____Dated_____.

I undertake that the scholarship amount in respect of the applicant if and when placed at my disposal will be disbursed by me for the specific purposes for whichit is given and the accounts will be regularly rendered to the authority which awarded the scholarship. In case the applicant leaves/migrate the Institution or otherwise discontinues the studies or accepts any other regular scholarship/stipend, the facts will be immediately reported to the said authority and payment of scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution an account of maintenance charges, fees etc. will also be refunded to the Government.

Signature of the Head of Institution

Place:

Dated:

Name in capital letters _

Designation _

Address_

(Seal of the Institution)

Check list of Document attached:

i. Scheduled Caste certificate	
ii. Income declaration/certificate	
iii. Attested copies of marks sheet/certificate	
iv. Attested Copy of Domicile certificate	
v. Copy of receipt of Train/Bus Pass	