

**FORM OF APPLICATION FOR STATE AWARD TO
MERITORIOUS HANDICAPPED STUDENTS BY JAMU AND
KASHMIR GOVERNMENT**

Particulars of students

1. Name of the student in full :
(Block Letters)
2. Postal Address :
3. Nature of Handicapped :
4. Name of College/University :
in which studying
5. Name and year of the examination :
6. Calendar year in which examination :
held
7. Marks obtained in the examination :
attested copies of marksheet to be
attached)
8. Whether day scholar or hostler :
9. Educational attainment reached :
at the time of applying for award
10. Date & year of commencement of :
the course
11. Date and Year of joining of the course:

Signature of the applicant

Recommendation of the head of the Institution

Certified that the student is /not attending school/College/University regularly and the facts stated above are true to the best of my knowledge and belief.

Head of Institution/College
University

2 b) Percentage of marks obtained in the last examination passed (in case of examination in music, indicate division obtained

10. Have you ever-received scholarship under the scheme if yes, indicate

1. The course/state or study

2. Period for which scholarship was paid

3. Sanction/reference no.

11. Please state whether you have under gone any training course for Adult Blind/Deaf approved by the Central/State Government.

12. 1. Course of study for which scholarship is now desired.

2. Date of commencement of the course

3. Approximate date of termination of the course

4. Date of joining the present standard in the course during the current academic year

13 For Blind

Have you engaged a reader?

If yes, please indicate

1. Amount paid per month

2. Date of engagement

14. documents attached

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I do hereby declare

(I) That I shall not accept emoluments, Scholarship, Stipend, or any other financial assistance or grant in any other form whatsoever, except exemption from tuition fees, from any other source during the tenure of the Government of India Scholarship if awarded to me under the above scheme.

Or that I am in receipt of assistance to the tune of Rs. _____ from _____ and in the event of

3 Award of Scholarship, I undertake to refund it from the month the scholarship is payable to me, to the source from where I have received it, and that during the tenure of Scholarship, if awarded, I shall not receive any other financial assistance, emoluments, scholarships, stipend or any Grant in any whatsoever, except the exemption from payment of fees.

(II) that the Statement made in the Application are true to the best of knowledge and belief and that no material information having a bearing on selection has been concealed or withheld.

Signature of Candidate

Counter signature of
Gazette Officer of

Central/state Government/
MP/MLA/ Magistrate/

Head of the Institution

Counter signature of the
Guardian in the case the
Candidate is Minor

Place :

Date: