

THE KARNATAKA STATE WAKF FOUNDATION FOR WOMEN DEVELOPMENT

215, 2nd Floor, Vikasa Soudha, Dr. Ambedkar Veedhi, Bangalore -560001

[For Muslim Women Only]

APPLICATION FORM FOR SCHOLARSHIP FOR STUDENTS OF PROFESSIONAL COURSES

(MBBS, BDS, BE, BUMS, BAMS, BHMS, MBA, MCA, BCA, BBM, B.Sc(Agri), B.Sc(Hort), B.VSc.)

-: Application should be filled in capital letters only: -

LAST DATE TO SUBMIT THE FILLED APPLICATION IS 16th NOVEMBER 2009

*One more attested
p. p. size photo of
the student similar
to the one affixed on
the applicant is to
be pinned
Here*

*Affix passport size
photograph of the
student with
Signature thereon*

01.	Name in full.	
02.	Date of Birth and Place.	
03.	Nationality and Religion.	
04.	Postal address with PIN Code. (a) Present: (b) Permanent:	
05.	Marital Status.	Married : () Single : ()
06.	(a) Name of Father / Mother / Guardian.	
	(b) Nationality and Religion.	
	(c) Occupation.	
	(d) Address: (a) Present: (b) Permanent:	
07.	Total annual income from all sources of Parents / Guardian.	Rs.

Continued...02

13.	List of documents to be attached (enclosed).	YES ()	NO ()
	(a) Fee receipt.		
	(b) II PUC Marks Card		
	(c) CET Admission order		
	(d) College Admission order.		
	(e) Income Certificate from the Tahsildar.		
	(f) Previous years Marks Cards.		
Note	All copies should be attested by a Gazetted Officer / Head of the Institution.		

I hereby declare that the statements made by me in this application form are true to the best of my knowledge and belief.

Place:.....

Date:.....

.....

Signature of the applicant.

DECLARATION BY PARENTS / GUARDIAN

I, hereby declare that the facts mentioned above are true to the best of my knowledge and in case any of the statements made above are found to be false, I hereby undertake to refund the scholarship amount to Karnataka State Wakf Foundation for Women Development, Minority Welfare Department, Bangalore.

Place:.....

Date:.....

.....

Signature of the Parent / Guardian

CERTIFICATE BY THE HEAD OF THE INSTITUTION

1. This is to certify that Kum:..... daughter of Sri./Smt..... is studying in Class / Semester/ Year and that she has secured admission through

2. Kum:..... is not a repeater in class in which she is presently studying.

3. I hereby recommend to consider her case for sanction of scholarship scheme of Karnataka State Wakf Foundation For Women Development, for Class /Semester/Year as the income of the family is Rs..... per year (Rupees.....)

4. The Student is required to pay an annual (admission & tuition) fee of Rs.....

Place:.....

Date:.....

.....

Signature of the Head of the Institution with Seal

NOTE: Scholarship is admissible only for the applicants whose family income is NOT MORE than Rs.2.50 lakhs per annum.