

Jamiat Ulama-i-Hind (Arshad Madani) Public Trust

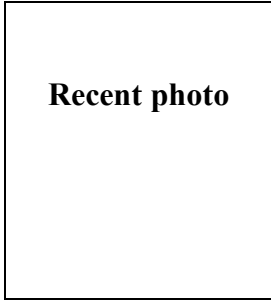
TALEEMI IMDAADI FUND

1, Bahadur Shah Zafar Marg, New Delhi-110002

Application Form For Financial Assistance-2017-18

A. Attach scanned copies of the following documents:

- The prospectus/information booklet of the concerned institution.
- Aadhar Card.
- Mark sheet of the qualifying Exam prescribed for the said course.



B. Income certificate of Father/Guardian/ affidavit in case of self employment

Section-A

1* Name of the course/training for which the candidate has been selected

2* %age of marks in the qualifying examination....., Rank in admission test.....

3* Details of the Institution offering the Course/Training

(Attach relevant pages of the prospectus/information booklet)

(i) Name: All India rank:.....

Address of the institution:

(ii) Fee Structure: a) total fee of the course: Rs.....

b) year/semester wise breakup:

1st Rs. 2nd Rs. 3rd Rs. 4th Rs. 5th Rs.

6th Rs. 7th Rs. 8th Rs. 9th Rs. 10th Rs.

4. Name the Candidate. (Block letters):

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5. Aadhar No.

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6. Father's/Guardian's Name:

Tel/mobile number:											
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7* Family Income (monthly) (yearly) (attach certificate)

8. Contact details of the applicant:

Telephone No.											
Mobile No.											
Email ID											

Section-B

9. Bank account details of the student:

- i Name of the account holder
- ii Bank account number
- iii Name of the bank
- iv Branch name (full address)
- v Branch code
- vi MICR code
- vii IFSC code of the bank

Verification

This is to certify that Mr./Ms..... S/o and D/o Mr./Ms..... has been admitted in (Name of course) as a full time regular student in the academic session 2017/2018.

He/She has paid Rs..... towards fees on dated..... vide receipt No..... This further certified that he/she is not getting any financial assistance from any source.

Date
Stamp

Signature:
Head of the institution

Section-C

(For Office use only)

Score:

*1. Course	*2. %age	*3. Institution	*7. Income	Total

Recommendation of the expert committee:

Names and signatures of committee members :

	Name	Signature
(1)
(2)
(3)
(4)
(5)

Remarks/Approval of the sanctioning authority:

.....
.....

Signature