

Scholarship Form - Annexure - 03

KONKAN CATHOLIC ASSOCIATION (R)

No. 34, 10th Main, 2nd Cross, Mathikere, Bengaluru 560 054

Application Form

Affix
Passport
size
photo

- I. a) Name of the Student
- b) Date of Birth
- c) Gender: Male Female
- d) Permanent Address
- II. a) School/Institution Studying
- b) Class
- c) Year
- d) Annual Fee
- III. a) Father's Name
- b) Occupation
- c) If in service, Name and Address of Establishment
- Salary Slip (Photocopy – Compulsory)
- Phone No. (Compulsory)
- IV. a) Mother's Name
- b) Occupation
- c) If in service, Name and Address of Establishment
- Salary Slip (Photocopy – Compulsory)
- Phone No. (Compulsory)

FOR OFFICIAL USE

FRESH

RENEWAL

2nd 3rd 4th

5th 6th 7th

8th 9th 10th

REQUIREMENTS

I. Recommended by
Name

Phone

II. Membership No.

III. Bank Pass Book

(Photo Copies)
should have
the following details:

- a) Bank Account
Holder's Name
- b) Bank Account
Number
- c) Bank Name
- d) Bank Branch

IV. One Passport Size Photo

VI. Fee Receipt

(Photocopy) with Seal and Signature of Authorized Person of the School/Institution

VII. ID Proof

Address (Photocopy) (Aadhar Card, Ration Card etc.)

VIII. Marks Card (Photocopy)

Amount Requested

Amount Sanctioned

Approved

Not Approved

V. a) Guardian's Name

b) Occupation

c) If in service, Name and Address of Establishment

.....

.....

Salary Slip (Photocopy – Compulsory)

Phone No. (Compulsory)

.....
Parent's Signature

.....
Guardian's Signature

FOR OFFICE USE ONLY

Scholarship Committee's View

.....

.....

.....

Note :

.....

.....

.....

.....

.....

.....

.....

.....
President

.....
Secretary

.....
Treasurer

(Incomplete and False Information Application Forms will be rejected)

Approval or Rejection of Application Form will be decided by the Scholarship Committee