



SCHOLARSHIP APPLICATION FORM

Scholarship is based on assessment of need and merit as well as availability of funds. Selection will be decided on the basis of information provided in this form and investigations for the authentication of provided information.

PROVIDING FALSE INFORMATION:

Providing false information may result in one or all of the following:

- Cancellation of admission.
- Rustication from the college.
- Initiation of criminal proceedings.
- Disqualification for award of any future loan/scholarship.
- Refund of all the payment received and or a penalty equal to total scholarship amount.

INSTRUCTIONS FOR FILLING OUT THE SCHOLARSHIP APPLICATION FORM:

- Fill in the form using black ball point pen and write in capital letters.
- Read the application form carefully.
- Make a photocopy of the application form.
- Complete the photocopy form and make sure everything is correct and final.
- Copy all information from photocopied form to the original form.
- Submit duly completed application form to the admission office or focal person.
- Furnish factual, comprehensive and authentic information in the form.
- Ensure that you have attached all the required documents by putting a tick mark in checklist.
- Answer all questions. Those not applicable should be marked "N/A"
- Affidavit needs to be submitted after final selection of the candidate.

APPLICATION FORM CHECK LIST

SN	DESCRIPTION	Tick Yes/No
1.	Copies of computerized NIC of <ul style="list-style-type: none"> ➤ Father ➤ Mother ➤ Guardian 	Yes/No Yes/No Yes/No
2.	Salary Certificate of <ul style="list-style-type: none"> ➤ Father ➤ Mother ➤ Guardian 	Yes/No Yes/No Yes/No
3.	Copies of Last Three (3) Months Utility Bills <ul style="list-style-type: none"> ➤ Electricity ➤ Gas ➤ Telephone ➤ Water 	Yes/No Yes/No Yes/No Yes/No
4.	Attested copy of rent agreement (if applicable)	Yes/No
5.	Copies of last & latest fee receipts of self and siblings	Yes/No
6.	Copies of medical bills/Expenditures related documents (if applicable)	Yes/No
7.	Copy of service record /pension book	Yes/No
8.	Copy of salary slip/pension slip	Yes/No
9.	Tick the section when completed <ul style="list-style-type: none"> ➤ Section A : Personal and family information. ➤ Section B : Cumulative Information of Self, Parents & Guardian assets. ➤ Section C: Financial arrangements for current year. ➤ Section D: Educational Record. 	Yes/No Yes/No Yes/No Yes/No
10.	DO's <ul style="list-style-type: none"> ➤ Send your application by post or submit by hand to the admission office or focal person. ➤ Place documents in right order as per above section (1 to 8). ➤ For the information not present/relevant write in capital letters N/A. 	
11.	DO NOT: <ul style="list-style-type: none"> ➤ Provide False/ Vague incomplete information. 	



MCCM Needs Based Scholarship Program

Name of College, _____.

Class: ____.

1. Applicant's Name. _____.

2. (i) Age. _____ (ii) Domicile. _____

3. (i) Tel. _____ (ii) Mobile _____

(iii) E-mail. _____

(iv) Current Address. _____.

(v) Permanent Address. _____.

4. Total family Members _____.

SN	Name Of Family Members	Relationship	Marital Status	Remarks
I.				
II.				
III.				
IV.				
V.				
VI.				

5. Details of family members earning (take extra sheet if required)

SN	Family Member Name	Relationship	Family Members Occupation	Organization Name	Monthly Gross Payment/Earning	Designation	Remarks
I.							
II.							
III.							
IV.							
V.							
VI.							



MCCM Need Based Scholarship Program

6. Total monthly family income. Rs: _____

7. Brothers/Sisters Children /Family Members Studying _____

SN	Name	Relation With Applicant	Name & Address of Institute	Fee per Month

8. Total Fees & Tuition Charges Rs:

9. Father's Name _____

10. Computerized NIC No _____

11. Status Alive/ Deceased

12. Professional Status Employed / Retired/ Business owner.

13. Name of Company /Employer. _____

14. Tel (office) _____ Mobile _____

15. Occupation Type _____

16. Designation & Grade (BPS/SPS/PTC/etc) _____ Gross monthly income _____

17. Total Net Monthly Take Home Income (Salary/Pension/Others).



MCCM Need Based Scholarship Program

18. FAMILY EXPENDITURES:

- Accommodation Expenditures
- Type Bungalow Apartment/Flat Town House Village House
- Status Rented Self /Family Owned Employer/Govt Owned
- Rent Payment Self Employer/Govt Others

19. Utilities Expenditures.

Last Month Utilities Paid

Telephone	Electricity	Gas	Water

**20. Medical Expenditures: Average of last three months,
(Per Month Expenditure)_____.**

Total Family Expenditures

SN	Education Expenditure	Accommodation Expenditure	Utilities Expenditure	Medical Expenditure	Misc Expenditure	Total Monthly Expenditure

21. Does the family own any Transport Yes/No

- If any kindly fill the relevant detail.

SN	Transport Type Car/Motor Cycle/Others	Make /Model	Engine Capacity(cc)	Registration No	Ownership period

22. Area and location of Land (s) Plot (s) owned_____.

Assets Title	Qty	Size	Location(address)	Cultivable Area	Agricultural Yield Per Acre
Residential					
Commercial					
Agricultural					
Employer/Govt Scheme					

23. Applicants Educational Record:

Level /Class	Name and Location of Institute	Per Month Fee	Division	%age



24. UNDER TAKING.

- The information given in this application are true to the best of my knowledge and I understand that any incorrect information will result in the cancellation of this application. If any information given in this application is found incorrect or false after grant of financial assistance, the institute will stop further assistance and the student will have to refund all payment received and or penalty equal to total scholarship amount.

- College reserves the right to use information given in this form for verification and purposes.
Parents/Guardians Signatures: _____.
Applicant Signature: _____.

FOR OFFICIAL USE ONLY

Are the applicant documents in order? Yes/ No

Application Case Review Date;

i. _____ ii. _____

Additional Remarks. _____

Date

Department Name

Signature
Head of Department/Focal Person