SACRED HEART COLLEGE (AUTONOMOUS), THEVARA, KOCHI—682013

Application form for Financial Assistance for Academic Work

PERSONAL DETAILS

	T				
Name of Student					
Course of Study & Year of Joining					
Date of Birth		Contact No.			
Present Semester		Roll No			
Religion and Community		•			
Name of the Parent/Guardian		Contact No.			
Whether staying in College Hostel? :	Yes/No		ļ.		
If No, address of residence :					
Whether eligible for receiving fina	ncial assistance fron	n other sources? Yes/	No		
If yes, details of assistance receive	d/ receivable: Rs				
	ACADE	MIC DETAILS			
Name of the institution	Course	Marks	Year of passing	No. of attempts	
		obtained (%)			
Descentage of mostly obtained in	Sam 1 .	I Sem	<u>I</u> Sem		
Percentage of marks obtained in the present course:	Sem 4:	2 :	3:		
-	Sem 7 :	Sem	Sem		
	Sem 10 :	5:	6:		
	INCOL	ME DETALESm	Sem		
Name of Father & Occupation	8 : Mo	8: 9: Monthly			
Name of Mother & Occupation		Inc	come :		
Details of other family members	Name	Mo	Monthly Occupation Income :		
Brothers and Sisters):	Name				
Details of fees (Tuition/Hostel/other	s, including cost of bo	ooks etc.) for the course	e during semester		
	Item	F	Fees Paid		

Total amount of financial	assistance re	equested for Semester :	Rs.		
Additional Assistance requ	uired: Lunch	/Books/Study related articles :			
		DECLARATIO	<u>N</u>		
-		on given above is true and accu ssistance received by me, as and			Further, I also
		the Sacred heart College inform			
ū	·	college on completion of my	•		
Signature of Applicant :			Name		
Signature of parent/ guard			Name		
Permanent address of app	olicant & Pho	one :			
	ı	RECOMMENDATION BY THE	CLASS TEACH	<u>-IER</u> (Confidential)	
Academic Performance of	• • •	nt:			
General Conduct of the ap	-				
Applicant's financial backs	ground:				
Remarks if any:		T		Τ	<u> </u>
Name & Signature:				Contact No.	
		Forwarding remarks	of HoD (Co	nfidential)	
				·	
Name & Signature:				Contact No.	
	BAN	IK DETAILS (Account in wh	nich Scholars	<u>ship is to disburse</u>	<u>d)</u>
A					
Account Number	:				
Account holders' Name	:				
IFSC Code	:				
Bank & Branch	:				
		FOR OFFICE USE (ONLY		
Remarks of the Welfare F	und Commit	tee:			
Educational Assistance		: Granted/ Not Granted			
Amount sanctioned: Rs		Lunch/Books/ Study relate	ed articles:		
				•	