CHECK LIST (RENEWAL APPLICATION)

1. Name of the Student 2. Name of the Institution 3. Year of Admission 4. Course of Present Study SC / ST / OBC / MBC / General 5. Category 6. Phone/Cell No: E.mail I.D 7. Aadhar No Detail of Financial Assistance Already Availed 8. Financial Assistance Amount Sanction Order No. and Cheque No. and Date Availed Date I Year II Year III Year

(FOR DIRECTORATE OF HIGHER AND TECHNICAL EDUCATION OFFICE USE ONLY)

9. Copy of CENTAC Selection Order : Enclosed / Not enclosed

10. Self Affidavit : Enclosed / Not enclosed

11. Caste Certificate (In case of SC / ST / OBC / MBC) : Enclosed / Not enclosed

12. Attested copies of Mark List for Previous Year : Enclosed / Not enclosed

Examination

13. Application duly filled in : Enclosed / Not enclosed

14. Attested copy of 1st page of Bank Pass Book / Account

Statement

: Enclosed / Not enclosed

SIGNATURE OF DEALING ASSISTANT

SIGNATURE OF SECTION HEAD

APPLICATION FOR PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE (RENEWAL APPLICATION) – ANNEXURE – II [Rule VII (5)]

PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE TO THE STUDENTS STUDYING ______ COURSE

1.	Name of the Student (in BLOCK LETTERS)	
1.	Name of the Student (in BLOCK LETTERS)	•
2.	Institution	:
3.	CENTAC No. & Year of admission	:
4.	Students Bank Account Details	
	(a) Name of the Bank & Branch	:
	(b) Bank Account No.	
5.	Last Year Sanction Order No. & Date	:
6.	Number and Date of Cheque received in the Previous Year	:
7.	Course of Present Study	:
8.	Whether promoted to next higher class?	:
9.	The date on which he / she joined the class in the current academic year	:
10.	The month in which his / her University Examination of the current academic year will ordinarily be over	:
11.	(a) Details of marks obtained in the Non-semester / Semester Examination	:
	(b) Total Number of maximum marks	:
	(c) Marks obtained by the Scholar (Both semester)	:
	(d) Percentage of marks obtained by the Scholar (Aggregate of both semesters)	:
12.	Character and conduct of the Student	:
13.	Specific recommendation of the Principal / Head of the Institution	:
Place	e :	
Date	:	Signature of the Head of the Institution

CERTIFICATE

(In case where the marks are indicated by Grades or Grade Point Average this Certificate furnished in addition to the attested copies of the marks lists)

	Certified that Thiru / Selvi
doing	in
(Name	of the College) has secured not less 50% of marks in the aggregate of I and II Semester
Examir	nation / I, II and III Trimester Examination / in the University examination during the Academic year
	.
Place	
Date	: Signature of the Head of the Institution

CERTIFICATE

(In case the student was absent on Medical Grounds from either of the Semester / Trimester / University Examination)

	Certifie	ed that Thiru / Selvi		did
not app	pear for	the following examination(s) during the	course of the academic year	
on valid	d medica	al grounds. The Medical Certificate is en	closed.	
		EXAMINATION	DATE(S)	
		(i) I or II Semester	:	
		(ii) I or II or III Trimester	:	
		(iii) University Examination	:	
had he		, and the second se	eneral academic performance of the student oned examination(s), he / she would have sect	
not less	s than 5	0% of the total marks in the aggregate.		
Place	:			
Date	:		Signature of the Head of the Institution	on
NOTE				
	be 2. Th	rejected. e Annual Progress Report of each Schol	rectly furnished, the Annual Progress Report war should be forwarded to the Director of Higher one month from the date of publication of	

results.

SELF AFFIDAVIT

(To be furnished in Stamped Paper worth Rs.5/-)

I, Son / Daughter of		
	of Government of Puducherry, hereby declare that the rnished by me along with the applications for the Award o	
Perunthalaivar Kamarajar Financial Assistanc	e are true and correct.	
Further, I declare that I shall devote r received the Scholarship.	ny full time to the course of study for which I have applied	
·	articulars given in this declaration being found to be false or all Assistance I shall refund the double the amount of the overnment of Puducherry.	
Place :	Signature of the Student	
Date :	Name	
	Address	
Witness 1.	Name	
	Address	
Witness 2.	Name	
	Address	