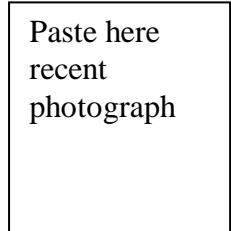


**ACCEPTANCE FORM OF P.N. MISRA POST GRADUATION MERIT SCHOLARSHIP
INSTITUTED BY
PRADEEP RICHA EDUCARE FOUNDATION**

I accept the offer of award of P.N. MISRA POST GRADUATION MERIT SCHOLARSHIP awarded by Pradeep Richa Educare Foundation. I certify that I fulfill the conditions of the scholarship scheme. The required details as desired are stated below:



1. Name of the candidate
2. Mother's Name
3. Father's Name.....
4. Date of Birth: dd/mm/yy...../...../.....
5. Sex
6. Permanent Address:
.....
.....
State: Pin code
7. Telephone No. with STD Code: Mobile No.....
8. Email Address:
9. Address for Correspondence:
.....
.....
Pin code
10. Details of receipt of any other scholarship:
.....
.....
11. Particulars of Savings Bank Account of the applicant:
 - a) Account No.
 - b) Name of Bank.....
 - c) Branch Code:
 - d) Branch address:

Pradeep Richa Educare Foundation

Registered Address: Sadhika Farm, Mall Road, Behind D-3 Vasant Kunj, New Delhi-110070
Alld. Office Address: 3rd Floor, N/A/2, Civil Lines, Tashkent Marg, Allahabad-211001

.....

I undertake to follow and shall be bound by the rules of the scholarship which I have read and understood after application of mind.

Place: Signature of the candidate:

Date: Name:

TO BE VERIFIED BY THE HEAD OF DEPARTMENT OF DEPARTMENT OF MATHEMATICS OF THE UNIVERSITY OF ALLAHABAD

I certify that the facts stated above by Mr. /Ms

S/o,D/o.....

R/o..... for the purpose of award of P.N. MISRA POST GRADUATION MERIT SCHOLARSHIP awarded by Pradeep Richa Educare Foundation, are true and correct as per the records submitted to the University of Allahabad

Place:

Signature:

Date:

Name:

SEAL.....

Encl:

1. A copy of Bank Pass Book showing details of bank account.
2. An additional photograph mentioning the name of student and name of father/mother on the back.

Pradeep Richa Educare Foundation

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