

Application for Student Aid (2023-24)

Name of	f the applicant and Registration num	ber:	
Course:	Major:		Semester:
Name of the last examination with year:			Percentage/GPA:
E-mail I	D:		Mobile No:
Father's	name:	Mother's name	
Name ar	nd income of the earning family men	mber:	Relation
	should not exceed Rs.8000/- per month, it t Group-A Govt. Officer or Executive Officer		
Reason	for applying Student Aid:		
At pres	ention: I hereby declare that informsent I do not avail any other find benefit I shall inform the Universe. Attested copy of mark sheets semester system) Current family income certification.	nancial benefit. Subsequentiversity Authority. I enclosed of the last year (last two sen	itly if I avail any ose the following
Signatu	re of the Student		
Remarks	s of the HOD:		
Signatur	re of Head of the Department		
Remarks	s of the Dean of Students (whether the	he applicant is staying in hoste	el):
Signatur	re of the Dean of Students	Date:	