

# APPLICATION FORM

## (BANISHREE-A Scheme of Scholarship for Physically Challenged Students)

(To be filled in by the candidate)

For the year .....

1. **Name in full**  
(In block letter) .....
2. **Address** .....  
 Village/Ward ..... P.S. ....  
 G.P. ....  
 Block/NAC/Municipality .....  
 District .....
3. **Category of Disability** : OH/HH/VH/MR/CP  
(Pl. tick whichever is applicable) (✓)
4. **Are you a citizen of India?** (Pl. tick) (✓) : Yes/No
5. **Whether Scheduled Caste/Tribe/OBC/General** :  
(Pl. mention)
6. **Male/Female** (Pl. mention) :
7. **Date of Birth** (Pl. mention) :
8. **Name and address of the father/mother/guardian** .....  
 .....  
 .....
9. (a) Relationship with the guardian (if applicable) :  
 (b) Total monthly income of the parents/guardian :
10. **Nature of scholarship** (Pl. tick) (✓) : (fresh/renewal)
11. (a) Have you ever received Scholarship under any :  
 other scheme. (Pl. tick) (✓). Yes/No

(b) If yes, indicates :-

(i) Class in which you received the scholarship :

(ii) Period for which you received such scholarship :

12. Mention:-

(a) Class for which I am applying for scholarship :

(b) Academic year of such class :

(c) Date on which you got admission :

13. (a) If you are visually challenged students, indicate : Yes/No  
if you have engaged a reader? (Pl. tick) (✓)

(b) If you are Orthopaedically handicapped students :  
being 75% and above disability indicate the  
mode of transport.

14. Document attached :

(i) Income Certificate/copy of BPL Card (Pl. tick) (✓) : Yes/No

(ii) Disability Certificate (Pl. tick) (✓) : Yes/No

(iii) Mark-sheet of last Exam. passed (Pl. tick) (✓) : Yes/No

I declare that I have not received (not receiving) any other financial assistance from State/Central Govt.

Signature of the student

Date .....

Place .....

**(To be filled in by Head of Schools/Colleges/Educational Institutions)**

I certify that :-

- The information furnished by the candidate (name .....  
.....) have been verified & found correct.
- The school/institutions in which the candidate is studying is  
Government/recognized private school/institutions (*Pl. tick*) (✓) whichever is  
applicable.
- The application is **recommended**.

Signature of Head of the School/Institution

Name .....  
(in block)

Address .....

Date ..... Place .....

**(To be filled in by Sanctioning Authority)**

I have verified the informations as furnished by Head of the School/Institution. I hereby  
sanction Rs .....towards scholarship and Rs. ....towards  
Reader's allowance/mobility support, thus totaling to Rs. ....

Sanction order No. .... /Dt. ....

**Signature with seal of  
BDO/Sub-Collector**