



ANURAG BOYS HOSTEL SCHEME
APPLICATION FORM

Session:

* Note: This Scholarship will be given only to the economically backward outstation boy students (special cases) of B. Pharm (I / II / III / Final Year) and M. Pharm (I / Final Year) of institute in the form of concession in hostel fees.

Affix recent color passport size photograph

Name of Student: _____

Date of Birth: _____ Male/Female: _____

Category: OPEN/OBC/SC/ST/VJ-NT/SBC/MINORITY

Class: B. Pharm I/II/III/I M. Pharm I/II : Branch: _____

Father's Name: _____

Occupation: _____ Annual Income: _____

Mother's Name: _____

Occupation: _____ Annual Income: _____

Total Annual Income of Family Rs: _____

*(Produce Annual Income Certificate of Parent/Guardian)

Communication Details:

Residential Address: _____

_____ Pin code: _____

Mobile No.: _____ Email ID: _____

UNDERTAKING

I hereby declare that, I shall abide by the terms and conditions for the sanction of “Anurag Boys Hostel Scheme” for economically backward (special cases) students. I undertake, that if at any stage, it is found to the satisfaction of the sanctioning authority that, the information given by me is false or if I violate the terms and conditions of the scholarship, the scholarship sanctioned to me, may be cancelled and the entire amount of scholarship will be refunded by me or recovered from me, apart from liability for such penal action as warranted by Law.

Date:

Signature of Parent/Guardian Signature of Student

Name: _____ Name: _____

- Documents to be attached:**
- 1. Annual Income Certificate of Parents/Guardian/Applicant
 - 2. All the documents of qualification certificate
 - 3. All the documents related to admission

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RECOMMENDATION FROM DEAN STUDENT WELFARE

The “**Anurag Boys Hostel Scheme**” for economically backward outstation boy student in terms of concession in hostel fee of Mr._____for the course of B. Pharm (I/ II/ III/Final Yr.) / M. Pharm (I/ Final Yr.) in academic year _____is **Recommended / Not Recommended** as per the policy of college and documents provided.

Dean Student Welfare

Date:

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APPROVAL FROM PRINCIPAL

The “**Anurag Boys Hostel Scheme**” for economically backward outstation boy student in terms of concession in hostel fee of Mr._____for the course of B. Pharm (I/ II/ III/Final Yr.) / M. Pharm (I/ Final Yr.) in academic year _____is **Accepted / Not Accepted**.

Sanction Amount: Hostel Fees / Mess Fees / Both / Any other

Principal

Date:

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FOR OFFICE USE

Application of Mr. for the “**Anurag Boys Hostel Scheme**” received and processed on date for in academic year

Signature of Accountant

Date: