



University of Kashmir, Srinagar

Office of the Dean Academic Affairs

APPLICATION FOR GRANT OF FINANCIAL ASSISTANCE UNDER THE STUDENT'S AID CORPUS FUND SCHEME

01. Name (Capital Letters)
02. Fathers/Guardian's Name
03. Father/Guardian's Occupation
04. Father/Guardian's Monthly Income
(Attach certificate duly signed by the competent authority)
05. Permanent Address
06. Address for Correspondence
07. Mobile/Contact No.
08. E-Mail
09. Category
(Attach certificate)
10. Name of the Department
11. Programme & Semester
12. Category under which the admission is sought/session
.....
13. Date of admission /Session/Class Roll No.
.....
14. Account No. with Bank Name/Branch/IFSC Code

I hereby declare that:

- i) The above information furnished by me is true and correct to the best of knowledge & belief & nothing is concealed therein.
- ii) I belong to _____category.
- iii) I am not in receipt of any sort of assistance, Scholarship/Stipend from the state or Central Government or any other agency/Institution as on date.

Signature of the Father/Guardian

Signature of Applicant

This is to certify that the above student belongs to _____ category and deserve Financial Assistance under Students Aid Corpus Fund scheme. His/her case was examined in the Departmental Committee & is strongly recommended. The original income certificate issued by the competent authority for the current year along with other requisite certificate are enclosed.

Seal & Signature of Head