**Application for Claiming Scholarship**

May I request you to grant me scholarship for continuing my Diploma / Degree / Post Graduation Diploma / Masters Course. I am furnishing the details below for your kind consideration.

|  |  |
| --- | --- |
| Name of the student |  |
| Roll # / Registration # |  |
| Category of Admission |  |
| Courses enrolled studying |  |
| Date of Birth & Age |  |
| Name of the Institute |  |
| Name of the University |  |
| Tution fee payable for the current academic year |  |
| Marks obtained in the qualifying exam and max. marks applicable |  |
| Whether married? | Yes / No |

**Place:**

**Date: \_\_\_\_\_\_Signature of the student**

­­­­­­­­­­­(To be filled in by the Employee)

|  |  |
| --- | --- |
| Name of the Employee |  |
| Relationship with the Candidate | Self / Spouse / Child |
| Designation |  |
| Department |  |
| Employee Code |  |
| Name of the Employer | SMU / SMU DDE / SMIMS/ CRH / SMIT |
| Have you availed Manipal Scholarship for any other child? | Yes / No (if yes, please furnish particulars) |
| Have you obtained scholarship for this ward for this course from any other source | Yes / No (if yes, please furnish particulars) |
| Address for Communication |  |

I certify that the information furnished above is true to the best of my knowledge and belief.

**Place**

**Date: Signature of the Employee / Parent**

(**To be filled in by the Employer)**

Notes on the award of the Scholarship

The above information is correct and is verified with the records and is found to be true. The employee has not availed scholarship from any other source for the said student.

Date: Signature of the Employer (with seal)

**For office Purpose**

|  |  |
| --- | --- |
| Note by HR  Date: | Signature with seal |
| Note by Finance  Date: | Signature with Seal |

Details of payment made

Payment verified by (*Signature with Name*)