Check List (Renewal)

1. Name of the Student	:				
2. Name of the Institution	:				
3. Year of Admission	:				
4. Course of Present Study	:				
5. Category	:SC/ST/OBC/MBC/General				
5a Mobile Number:	Phone Number:				
6. Detail of Financial Assistance Already Availed					

F.A. Availed	Amount	Sanction Order No & Date	Cheque No.& Date
r.A. Avancu	Amount	Sanction Order No & Date	Cheque No. & Date

I Year

II Year

III Year (FOR DIRECTORATE OF HIGHER & TECHNICAL EDUCATION OFFICE USE ONLY)

7. Copy of CENTAC Selection Order	: Enclosed / Not Enclosed
8. Self Affidavit	: Enclosed / Not Enclosed
9. Income Affidavit	: Enclosed / Not Enclosed
10. Income Limit	: Below Rs.3 Lakhs / Rs.3 to 5 Lakhs
 11. Caste Certificate (In Case Of SC / ST/ OBC / MBC) 12. Attested copies of Mark List for Previous year Examination 	: Enclosed / Not Enclosed : Enclosed / Not Enclosed
13. Application duly filled in	: Yes / No
14: Attested copy of 1st Page of Bank Pass Book / Account Statement	: Enclosed / Not Enclosed

SIGNATURE OF DEALING ASSISTANT

SECTION HEAD

<u>APPLICATION FOR: PERUNTHALAIVAR KAMARAJAR FINANCIAL</u> <u>ASSISTANCE-RENEWAL ANNEXURE – III</u>

ANNUAL PROGRESS REPORT FOR 200____-200____ [Rule VII(5)]

PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE TO THE STUDENTS STUDYING _____COURSE

1.	Name of the student (in BLOCK LETTERS)	:
2.	Institution	:
3.	CENTAC No. & year of admission	:
4.	Students Bank A/c Details	
	(a) Name of the Bank & Branch	
	(b) Bank Account No.	
5.	Last Year Sanction Order No. & Date	:
6.	Number and Date of Cheque	:
7.	Course of Present Study	:
8.	Whether promoted to next higher class?	:
9.	The date on which he/she joined the class in the current academic year	:
10.	The month in which his/her University Examination of the current academic year will ordinarily be over	:
11.	 (a) Details of marks obtained in the Non-semester / Semester Examination (b) Total Number of maximum marks (c) Marks obtained by the Scholar (Both semester) (d) Percentage of marks obtained by the Scholar (Aggregate of both semester) 	:
12.	(Aggregate of both semesters Character and conduct of the student	
12.		
13.	Specific recommendation of the Principal / Head of the Institution	:

Place:

Date :

Signature of the Head of Institution

ANNEXURE - II

INCOME AFFIDAVIT

[Rule VII(3)]

DECLARATION OF INCOME FOR THE YEAR 200 - 200 (ENDING 31ST MARCH OF A YEAR) FOR PURPOSE OF FINANCIAL ASSISTANCE UNDER THE SCHEME PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE TO THE STUDENTS STUDYING COURSE

I,(Name of Father / Mother) Son / Daughter of Thiru.Tmt...... at present

residing

.....

solemnly affirm and says as follows:-

1. That my S	Son/Daughter	Thiru/Selvi				(Nar	ne of
the student) who	is applying for	or the grant of F	inancia	al Assist	ance under the	e Sch	eme
Perunthalaivar	Finance	Assistance	to	the	students	stuc	lying
		course		is	studying		in
					(Name	of	the
institution)							

3. That the statements made in the foregoing paragraphs are true to my knowledge.

4. That I further undertake that in the event of the particulars given in this Declaration being found to be false, I shall refund to the Government of Puducherry double the amount of the Financial Assistance paid to the said Awardee and the Government's decision on whether the Declaration of particulars is false shall be final and binding on me.

SCHEDULE

Signature

Signature of Executive Magistrate

Name in full :

(To be signed in the presence of Executive Magistrate who affixes his seal and signature)

at

SCHEDULE

(All the columns in the Schedule should be filled in properly by Words and not by Dashes or Dots)

I. Extent of land held and income -

(a) Independently as owner -

i)	Area	:
ii)	Village	:
iii)	Survey No.	:
iv)	Land Revenue Assessment	:
V)	Annual Income	: Rs.
(b) Jo	intly as owner -	
i)	Area	:
ii)	Village	:
iii)	Survey No.	:
iv)	Land Revenue Assessment	:
V)	Annual Income	:Rs.
(c) In	dependently as tenant -	
i)	Area	:
ii)	Village	:
iii)	Survey No.	:
iv)	Land Revenue Assessment	:
V)	Annual Income	:Rs.
(d) Jo	intly as tenant -	
i)	Area	:
ii)	Village	:
iii)	Survey No.	:
iv)	Land Revenue Assessment	:
v)	Annual Income of the Scholars Father / Father	:Rs.

II.	Property held and Income (Houses, shop, buildings, house-sites, etc.) i) House No.	:
	ii) Street / Road	:
	iii) Village / Town / City	:
	iv) Area of Site	:
	v) Rent derived, if any	:
	vi) House Tax Paid	:
	vii) Sanitary cess or other house taxes paid	:
	viii)Net Annual Income after deduction of	:
	items (vi) and (vii)	
III.	Income from shops	
	i) Address of Shop	:
	ii) Nature of trade	:
	iii) Sales / Tax Income Tax Paid	:
	iv) Licence No.	:
	v) Rent derived, if any	:
	vi) Annual Income	: Rs.
IV.	Salaries drawn	
	i) Name of the employer	:
	ii) Office / Unit in which he is working and	:
	designation	:
	iii) Address of Office	:
	iv) Annual emoluments for 200 200	:
	Break up for annual emoluments - Basic Pay	: Rs.
	D.A. / A.D.A.	: Rs.
	H.R.A. etc.	: Rs.
	O.T.A. / Bonus	: Rs.
	Others	: Rs.
	Total	: Rs.

(Annexure has to be attached from the Pay Drawing Officer in respect of salaried person)

V. Other Source of Income

i)	Income from subsidiary industries / Part	: Rs.
	time occupation	

- ii) Amount drawn as wages : Rs.
- iii) Any other income : Rs.
- VI. Annual Income of wife and the scholar from : any source
- VII. Total income of the family for the whole year : Rs. 200____ 200____

Average Income of the family for one month : Rs.

Signature of the Parent of Scholar

Note:

- (1) Total Income of the family should include income of father, mother and the scholars and of no other members though they may be earning.
- (2) If father is dead then mother's income will be shown alongwith the income, if any in the scholar's own name from shares, property, etc.
- (3) If both father and mother of the scholar are deceased, then the income, if any, in the scholar's name only will be shown and not he income of any guardian who may be supporting the scholar.
- (4) A detailed break-up from the annual emolument shown under Column No.IV (Salaries drawn) as required against the column should invariably be furnished.

CERTIFICATE

(In case where the marks are indicated by Grades or Grade Point Average this Certificate furnished in addition to the attested copies of the marks lists)

(Certified	that	Thiru /	Selvi .								
doing .			in									(Name
of the	College)	has	secured	not le	ss than	50%	of r	narks ir	the	aggreg	ate of I	and II
Semest	er Exami	nation	ns / I, II a	and III ⁻	Frimeste	er Exar	mina	ation / ir	the	Univers	ity exam	ination
during t	he Acade	mic Y	ear.									

Place:

Date :

Signature of the Head of Institution

CERTIFICATE

(In case the student was absent on Medical Grounds from either of the Semester / Trimester / University Examination)

Certified that Thiru/Selvi..... did not appear for the following examination(s) during the course of the academic year on valid medical grounds. The Medical Certificate is enclosed.

	EXAMINATION		DATE(S)
(i)	I or II Semester	:	
(ii)	I or II or III Trimester	:	
(iii)	University Examination	:	

Certified further that I am satisfied from the general academic performance of the student that had he/she appeared for (each of) the above – mentioned examination(s), he / she would have secured not less than 50% of the total marks in the aggregate.

Place:

Date : Signature of the Head of Institution

NOTE:

- 1. Please note that if the particulars are not correctly furnished, the Annual Progress Report will be rejected.
- 2. The Annual Progress Report of each Scholar along with a fresh Income Affidavit should be forwarded to the Director of Higher & Technical Education, Puducherry within one month from the date of publication of results.

SELF AFFIDAVIT

(To be furnished in Stamped Paper worth Rs.5/-)

I, Son/Daughter of

Further I declare that I shall devote my full time to the course of study for which I have applied / received the Scholarship.

Further I undertake in the event of particulars given in this Declaration being found to be false or become ineligible for receipt of the Financial Assistance I shall refund the double the amount of the Financial Assistance received by me to the Government of Puducherry.

	Signature of the Student
Date:	Name
	Address
Withess 1.	Name
	Address
Withess 2.	Name
	Address