

SIRUTHULIGAL CHARITY CLUB OF CEG

Gift a Smile

APPLICATION FORM

Name :
Roll No :
Department :
Address :

AFFIX YOUR
PASSPORT
SIZE
PHOTOGRAPH

Contact No :

Parents Name :

Contact No:

Amount Required :

Purpose :

Any Scholarships Applied * : YES NO

If Yes, Name of the Scholarship :

Any Bank loan applied : YES NO

Enclosures

1. Passport size photograph.
2. Request letter with Class Advisor signature and department seal.
3. Photocopy of, College ID
4. Ration card
5. Income certificate
6. Bank passbook front & entry pages (if loan or scholarship applied)
7. Mark sheets (10th, 12th) and Grade sheets (up to current semester)

Declaration : I hereby declare that all details furnished above are true to the best of my knowledge.

Date :

Place :

Signature

**Scholarship details will be verified with students section in the Dean office.. Amount will be provided only after proper scrutinisation and in accordance with terms and conditions of the club.*