APPLICATION FORM FOR SCHOLARSHIP ZILA SAINIK WELFARE OFFICE UT, CHANDIGARH CLASS:

1.	No, Rank & Name of ex-serviceman:				
2.	Ex-serviceman/widow Identity Card No. CHA-01/				
3.	Address	:			
4.	Telephone/Mobile No	:			
5.	Master/Miss	is my rea	I son/daughter and his	s/ her date of birth is	
6.	I have not claimed any scholarship and will not claim from any other sources during 2010-11.				
	Undertaking – I do hereby dect to the best of my knowledge detected at later stage, schola	and belief. In the ever	nt of any wrong statem	ent/ in the particulars	
Dated	d:	((Signature of the father/mother)		
	TO BE COMPLETED BY	THE HEAD OF THE SO	CHOOL/COLLEGE/INS	STITUTION	
1.	Name of the student	:			
2.	Father's name	:			
3.	Date of birth :				
4.	Class in which presently studying :				
5.	Name of the School/College/Institution :				
6. the st	%age of marks/CGPA (For Marks)	atric only) obtained in 8	s th / Matric / Plus two ex	xamination passed by	
	Examination Passed	Total Marks	Marks Obtained	%age/CGPA	

7. Whether the student is drawing or has drawn any scholarship from any other: Yes/No. source for the Year 2010-11.

8. Certified that the particulars given above have been verified by me from original documents produced by the applicant and as per records of this Institute are found to be correct. It is also certified that this Institute/School is a recognized by University/Board.

Dated: Signature of the Head of the Institute/ School with office seal.

DOCUMENTS REQUIRED

- 1. Photocopy of 8th/ Matric/ +2 Marks Sheet as applicable.
- 2. Photocopy of Matric certificate showing the date of birth (12th class only)
- 3. Photocopy of Ex-servicemen Identity Card issued by ZSWO, UT, Chandigarh.
- 4. Photocopy of discharge book/release order as applicable.
- 5. Application form should be signed by Principal/Head of the Institution where the candidate is studying after passing 8th/Matric/+2
- 6. Last date for submission of application is 30 Aug 2010.