

**THE KANGRA COOPERATIVE BANK LTD.**  
**C-29 COMMUNITY CENTRE JANAKPURI NEW DELHI-110058**  
**APPLICATION FOR SCHOLARSHIP FOR THE SESSION 2017-18**

1. Name of the member : -----
2. Father's Name : -----
3. Membership A/c No. : -----
4. L.F NO. : -----
5. Branch Name : -----
6. Local Address : -----  
-----
7. Telephone Number : -----
8. Name of Student : -----
9. Relation with the member : -----
10. Class Passed (8<sup>th</sup> / 9<sup>th</sup> / 10<sup>th</sup> / 11<sup>th</sup>) : -----
11. Year of passing the above class : -----
12. Roll No.of passed class as per marks sheet :-----
- 13 Marks obtained in the above class : 

TOTAL MARKS	MARKS OBTAINED	%age of passing
14. Class in which presently studying : -----
15. Name of the school in which at present : -----  
Studying -----

Signature of student : ----- Signature of member:-----

NOTE: THE FOLLOWING DOCUMENTS HAVE ALSO TO BE ATTACHED SEPARATELY

1. A photocopy of the certificate and marks sheet both duly attested by the Principal of the school or class 1 Gazette Officer.
2. Character Certificate and confirmation that the student is still pursuing his/her studies in the School in Class-----as a regular student from the Principal of School where the student is studying at present.

**(FOR OFFICE USE ONLY)**

Certified that particulars filled in above from sr.no.1.to 5. are correct as per our records

Signature of BM/DM

Approved scholarship for Rs. \_\_\_\_\_ (Rs. \_\_\_\_\_ )

Authorised Signatory