

THE KANGRA COOPERATIVE BANK LTD.
C-29 COMMUNITY CENTRE JANAKPURI NEW DELHI-110058
APPLICATION FOR SCHOLARSHIP FOR THE SESSION 2016-17

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 (8th / 9th / 10th / 11th) : -----
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