

**Government of West Bengal
Backward Classes Welfare Department**

APPLICATION FOR SIKSHASHREE SCHOLARSHIP TO SC / ST STUDENT STUDYING IN CLASS V TO VIII

☐ NEW/ ☐ RENEWAL

Entitlement Card No.

1. Full Name of Applicant (In BLOCK Letter):

Shri / Kumari

2. Name of Father/Mother/Guardian :

3. Sex: ☐ M ☐ F 4. Date of Birth:/...../..... 5. Tele No. (if any):

6. (a) Caste: ☐ SC / ☐ ST (b) Sub-Caste:

7. Permanent Address:

House No./ Village/ Para/ Road	Post Office	Police Station	District	State

8. Particulars regarding Father / Mother / Guardian who supports in applicant's studies:

(a) Name	(b) Occupation (if employed, give income certificate from the Employer)	(c) Address

9. Bank Details:

Bank Name	Branch Name	S.B. Account Number	IFSC Code	MICR

10. Name and Address of Institution:

Institution Name	Address	Class of Study	Actual Date of Joining the Class

11. Whether you in receipt of this Scholarship in the previous year ☐ YES / ☐ NO, if YES:

Amount Received (Rs.)	Scholarship Name	Give Details

12. Whether applied for any other Stipend / Scholarship:

13. Annual Gross Family Income from all sources:

I undertake that all the statements given above are correct and I have not applied for any scholarship from any other Department. I shall be liable to penal action if any statement made above is found false / incorrect.

Date:

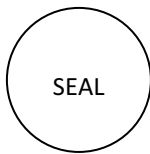
Place:

Signature of the Father/Mother/Guardian

Signature of the Applicant

One Passport size Photo with self-signature thereon duly attested to be pasted here and other two without attestation are to be submitted

The statements made by the applicant at Serial No. 1 to 13 are correct to the best of my knowledge.



Signature of Head of Institution

Name (in BLOCK Letter):

Designation:

Address:

State: Pin Code:

INCOME, CASTE AND RESIDENTIAL CERTIFICATE

(Should be signed either by a Member of Parliament or Member of a State Legislature or a Municipal Commissioner / Councilor / Panchayat Prodhan / Member of Zilla Parishad / Savapati of Panchayat Samity or a Government Officer. The Issuing Authority is requested to observe due caution as Scholarship is awarded on the basis of this very important document. In case of 9(b) Income Certificate of Employer is sufficient.)

Certified that the information furnished point nos. 1 to 13 overleaf are correct to the best of my knowledge:

Date:

Place:



Name (in BLOCK Letter):

Designation:

Address:

..... Pin Code:

*(This certificate will not be considered as a conclusive proof in case of issuance of Caste Certificate by competent authority.)

Note:

1. This form need not necessarily be obtained from Block / PO office and can be used by copying or downloading from the official website of the BCW Department www.anagrasarkalyan.gov.in / www.bcwdwb.gov.in;
2. Attested copies of all documents in support of claims for scholarship to be furnished along with this application. Original documents will be required to be produced for verification at the time of submission.
3. Payment of scholarship will be made only through Bank Account.
4. All column are to be filled up. No column should be left blank.