

PDPM

**Indian Institute of Information Technology,
Design and Manufacturing, Jabalpur**

Application form for Merit Cum Means Scholarship Academic Year -2020-21

1. Name of the Applicant: Capital Letter
2. Category (SC/ST/OBC/GEN)
3. State:
4.
 - (i) Institute Roll No.
 - (ii) Hall and Room No.
 - (iii) Allahabad Bank Account No.
 - (iv) Please Tick (B.Tech / CSE/ ECE/ ME)
 - (v) CPI :-
 - (vi) SPI of 1st semester of academic year 2019-2020 :-
 - (vi) SPI of 2nd t semester of academic year 2019-2020 :-
5. E Mail ID Address and Mobile No.
6.
 - a. Name of Father
 - b Name of Mother
 - c. Name of present Guardian
(His relationship with the student if parents are not alive)
 - d. Name of brother (s) and their occupation
 - e. Name of sister (s) and their occupation
7. Present Postal address of father/ guardian
 1. Fathers Gross Annual Income
 2. Mothers gross annual income (if applicable)
 3. Annual Income from other source
(i.e Investment in Bank/ post office/ UTI/ LIC/ Shares/ Debenture/ Landed Property/
Income in the name of the students etc, if any)
8. Total of 7 (1) + (2) + (3) above Rs.
9. Fathers/ Guardians Occupational Status (tick as applicable)
 - 1) In service (Government/ Private/ Public)
(Supported by IT form 16/ Saral Form whose annual income is above Rs. 50000/-)
 - 2) Other than Salaried/ Pensioner
(supported by Annual Income Certificate to be issued by /Tehsildar/)

10. Declaration

I declare the followings:

1. No disciplinary action has been taken against me by the Institute in the preceding academic year 2020-21.
2. I am not in receipt of any other scholarship/stipend/ financial assistance, etc. from any other sources.

Encl:

Signature of father/ Guardian
Student

Signature of

Questionnaire to be filled by students applying for MCM (Merit Cum means) scholarship

1. Please write in detail about Father's Occupation/Profession:-
 - a. Government Service/Private Service/Business
 - b. Describe the post and work if in service OR Describe the Business:-

2. Please write in detail about Mother's Occupation/Profession:-

3. No. of Four wheeler (Giver description regarding make and year):-

4. No of Two wheeler (Giver description regarding make and year):-

5. House :
 - a. Rented/ Owned
 - b. Plot area and constructed Area.
6. High School (10th Standard)
 - a. Name of School
 - b. Fees per month:-
7. Inter (12th Standard)
 - a. Name of School:-
 - b. Fees per month:-
8. Amount of Educational Bank Loan along with name of Bank:

Name:-

Roll No.

Sign:-

Form A

Annual income Certificate for those Parents/ Guardians who are in service (Govt or Private)

Income from Salary

Name and Address of the Employer

Certified that is employed in this organization in the capacity of (Designation.....) Post held by the Employee....., and that the break up of his/ her gross annual income from salary received in the financial year is as follows:

Item	Total Amount for 12 months
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Basic Salary if consolidated/ pay Band:

Grade Pay:

DA/ADA/ Relief:

Special Pay and Honorarium, Bonus etc if any:

Other Allowances if any:

Employer Signature with seal

Designation

Date

N.B: All the entries as stated in column 2 above must be supported by attested copy of IT **Form 16/ SARAL** form for the corresponding year.

Guardians whose annual gross income is below Rs. 50,000/- need not submit IT return. They have to submit a certificate from Employer/ Salary disbursing officer stating that their annual income is not taxable and they need not produce **IT Form 16**.

Form - B

(Declaration by the father/ guardian of the student)

I, Shri/ Smt.a resident of
Solemnly declare that:

1. My son/ daughter, Shri/ Miss Is currently studying at the PDPM Indian Institute of Information Technology, Design and Manufacturing Jabalpur, in 4-year B Tech programme in Engineering.
2. He/ She is an applicant for the award of Merit Cum Means Scholarship for the Academic year
3. I, declare that my spouse is employed/ not employed of my family in the financial year i.e during the period from 1st April..... to March 31..... was as mentioned hereunder (supported by document):

(A) From my own professional as indicated: Rs.pa
i) Income from Business/Medical Practice Legal Practice Rs.
.....pa Engineering Consultancy etc
ii) Income from Agriculture Rs.pa
iii) Income from Landed Properties Rs.
.....pa iv) Income from Investment in Bank/ Post office etc
Rs. pa
v) Income from Share Certificates/ Debentures Rs.pa
vi) Income from any other sources (i.e. Retirement Rs.
.....pa Benefits for VRS/ VSS etc if any

(B) Income of my wife (if any) pa
(if employed, salary certificate from employer to be enclosed) Rs.
.....pa

© Income in the name of my son/ ward (if any) Rs.
.....pa

Total Income (A + B + C) Rs.pa

Further, I declare that the information given above is true. I understand that the Merit Cum Means scholarship if awarded to my son/ daughter is liable to be withheld or discontinued at the discretion of the authorities of the PDPM Indian Institute of Information Technology, Design and Manufacturing Jabalpur, without assigning any reason. If subsequently (after award of MCM Scholarship to my ward) it is found that he/ she has been granted any other has been granted any other scholarship/ stipend/ Financial assistance etc by any Government / Non Government organization for the same period, I shall be

bound to refund the whole amount of scholarship/ free ship/ stipend/ Financial Assistance etc to the scholarship awarding authority immediately. I shall also be personally held responsible for the refund of the scholarship/ free ship amount (paid to my son/ daughter by the Institute) **and willing to be prosecuted as per law** in the event of any information in this declaration and also in the enclosed scholarship application form, being proved incorrect later on.

(Signature of father/ guardian)

Sworn before me this Day of2020 and signed

(Seal)

(Signature of first class Magistrate/ Notary public)

Form C

(For pensioner/ family pensioner only)

(Income/ salary certificate for those parents/ guardians who are in pensioners or retired from service or their wives are getting family pension)

Income from Pension/ Family pension: Rs.

1. Name and Address of the Ex Employer with PPO Number:

2. Certified that was employed in this organization/ superannuated from , in the capacity of (post held by retired employee) and that the break up of his/ her annual income from Pension/ family pension received in the financial year is as follows:

Item	Total amount for 12 months
1) Basic pension/ family pension	Rs.
2) Dearness Relief:	Rs.
3) Other allowances, if any	Rs.

Signature of ex employer

Pension disbursing officer

Designation

Date

(Official Seal)