

**CLAIM FORMAT FOR 2014-15**  
**LIST OF STUDENTS RECOMMENDED BY BACKWARD CLASSES AND MINORITIES WELFARE OFFICER**  
**Prematric- Scholarship ( Fresh / Renewal)**

Sl. No.	Name of the student	Date of birth	Gender (F / M)	Religion	Father / Guardian Name	Year of fresh scholarship sanctioned (2013-14)	% of total marks secured in final exam during 2013-14	Annual Income of parent / Guardian	Class / std in 2014-15	Whether the student is physically handicapped (Yes / No)	Name of the Institution with full postal address and pincode	Name of the District	Details of school Govt. / Govt. aided / Private (G/GA/P)	Whether Day Scholar / Hosteller D / H	Savings A/c Details of the student					Actual Course fee paid by the student				Current / Savings A/c Details of the School					
															Account No.	Name of the Bank	Branch code No.	IFS Code No. (11 digits)	Admission fee Rs.	Maintenance	Tuition Fees Rs.	Total Rs.	Account No.	Name of the Bank	Branch code No.	IFS Code No. (11 digits)			
1																													
2																													

**CERTIFICATE**

"Certified that all the details furnished by the Institutions and the amount claimed have been verified and found correct "

Superintendent  
O/o the District Backward Classes and Minorities Welfare  
.....District

District Backward Classes and Minorities Welfare Officer  
.....District