## Shiksha Sopan SHREE GANESH PRASAD VERMA UCHCH SHIKSHA PRAKALP

## **APPLICATION FORM**

1.	Name of the candidate:					Photograph				
2.	. Mobile NoEmail-ID									
3.	Name of the parent (father/mother on whom the candidate .is financially dependent):									
4.	Address:									
5.	Parent's PAN No.:									
6.	Family Record:									
	Name & Relation	Age	Academic Qualification	Occupation	Monthly	y Income				
					_					
7.	a. Programme in which the admission is offered									
	b. General education/ vocational education/ professional programme									
8.	Purpose for which the financial assistance is sought.									
	Admission fee/other payments to be made as part of the course (please specify)									
9.	Amount required Rs									
10.	Has the candidate ever been associated with the activities of Shiksha Sopan?									
	(If yes, in what capacity)	yes, in what capacity)								
					•••••					

11. Educational ba	ackground	l <b>:</b>								
Qualification	Year	School	Subjects	Division	Percen					
High School					marks					
Intermediate										
12. Would you lik	e to donat	e to Shiksha So	opan after your studies to su	apport one student un	der					
SGPV Prakalp	?									
Yes/No										
13. Any other info	rmation y	ou want to give	e the committee (If space is n	ot sufficient then kindly	write in					
separate page ar	nd attached	with the applicat	cion)							
Note: Student	Notes Students should also provide a photogopy of their more cheet and Andhar gord or									
	Note: Students should also provide a photocopy of their mark sheet and Aadhar card or PAN card along with the form.									
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Signature of the candidate										
Date:										
Recommendat	Recommendation of the SGPV committee			Recommended/ Not recommended.						
			Sanctioned A	mount: -						
Chairman of the SGPV committee										
	ic boi v v	commutee								
Date:										
Approved/ No	ot approv	ed.								
General Secre	tary									
	-									
Shiksha Sopar	1									

Date: