APPLICATION FOR FINANCIAL AID FROM STUDENTS AID FUND

1.	Name	Mobile No
2.	Class	Admission No
3.	Permanent Address	
	Father's Name	Occupation
5.	Mother's Name	Occupation
6.	Total income of the family (per month)	
7.	Is your brother/sister studying in this univer	rsity? Yes/No
8.	If so, write his/her Class & Admission No.	College
9.	Has he/she also applied for aid?	Yes/No
10.	Have you applied for or been granted half/f	full fee concession? Yes/No
11.	Do you have knowledge of computer applic	catons? Yes/No
12. No. of credit hours registered during the semester (after adding/dropping date)		
	Are you residing in the Hoster?	Yes/No
14.	Are you receiving some other finanacial aid	1? Yes/No
15. Value of scholarship/stipend/fellowship/aid received, if any		
16.	Are you on conduct/scholastic probation?	Yes/No
17. OCPA at the end of last semester		
16. Are you on conduct/scholastic probation? Yes/No 17. OCPA at the end of last semester		
a) Type of work (<i>Office/Laboratory/Field/Library</i>)		
b) Working period (Foreneen/afternoon/after office hours/ holidays)		
b) Working period (Foreneen/afternoon/after office hours/ holidays)c) Hours per month (Maximim allowed 20 hours)		
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	If no, give reasons for su	ubmitting application for financial aid

I undertake that I will work part-time with dedication and this will not affect my academic work if any way. I undertake that the financial aid earned/ granted from Students Aid Fund will be used to pursue my education at this university and shall not be misused.

Signature of parents

Signature of the student

Specific comments/recommendations of the concerned Advisor

Signature of the Advisor Name_____ (With rubber stamp)

Submitted to Dean, College of _____