



**DEPARTMENT OF HIGHER AND TECHNICAL EDUCATION
GOVERNMENT OF JHARKHAND
CHIEF MINISTER FELLOWSHIP YOJANA**



Application Number: _____

-----For Official Use-----

Are you belonging to Jharkhand domicile category?	Yes	No
Are your parent failing under taxable income slab?	Yes	No

PERSONAL INFORMATION

Name: _____ Category (ST/SC/OBC/Other) _____

Mobile No.: _____ Father's Name: _____

E-mail ID: _____ Father's Occupation: _____

Marital Status: _____ Mother's Name: _____

Gender: _____ Mother's Occupation: _____

DOB: __/__/____ Differently Abled: _____ Family Income: _____

Aadhaar No. _____ PAN (if Available): _____

Paste Your Duly Self-
Attested Photograph
Size-3.5x4.5cm

Address Section		Bank Details	
	Present Address	Permanent Address	Account Holder's Name
Address Line 1:		सत्यमेव जयते	Bank District
Address Line 2:			Bank Branch Name
District:			Bank Name
State:			Bank Account No
Pin Code:			Bank IFSC Code

Present Academic Details:-

Name of the Institute	
Institute Address	Address Line 1: Address Line 2: District: State: Pin Code:

Scholarship Type (Please ✓)	UG Level		Research		Paper Presentation	
Admission No						
Admission Date						
Name of Course						
Duration of Course						
Academic Session						
Academic Year of the Course						
Bonafide Certificate Attached (Please ✓)	Yes		No			
Did you receive any Scholarship in current financial year? (Please ✓)	Yes		No			
If Yes, kindly mention the name of the Scholarship						
Amount of Scholarship (in Rs.)						

Checklist of the Documents Attached

Sl. No.	Document Type	Documents Attached (Y/N/NA) (Tick ✓ as applicable)				
1	Domicile Certificate	Yes		No		NA
2	Income Certificate	Yes		No		NA
3	Aadhaar Card	Yes		No		NA
4	PAN Card	Yes		No		NA
5	Bonafide Certificate	Yes		No		NA
6	Bank Passbook	Yes		No		NA
7	ID Card Certificate	Yes		No		NA
8	Topper's Certificate	Yes		No		NA
9	Caste Certificate	Yes		No		NA

Declaration:

I hereby declare that the above information provided by me is true to the best of my knowledge and if any information at any stage is found to be false, my application may be withheld, and I may be considered for legally penal action.

Signature

Name:

Date: