कार्यालय अधिष्ठाता छात्र कल्याण

अटल बिहारी वाजपेयी विश्वविद्यालय, बिलासपुर (छ.ग.)

कोनी पुलिस थाना के सामने, बिलासपुर-रतनपुर मार्ग, कोनी, बिलासपुर (छ.ग.) 495009

क्रमांक : 462 / अ.छा.क. / 2022

बिलासपूर, दिनांकः

15 / 05 / 2023

प्रति.

विभागाध्यक्ष (समस्त) विश्वविद्यालय शिक्षण विभाग अटल बिहारी वाजपेयी विश्वविद्यालय, बिलासपुर जिला-बिलासपुर (छ.ग.)

विषय:- विभाग में शैक्षणिक सत्र् 2022-23 के सम -सेमेस्टर में अध्ययनरत् छात्रों के "Poor and Needy Student Scholarship" आवेदन के संबंध में।

उपरोक्त विषयान्तर्गत निर्धारित प्रारूप (विश्वविद्यालय के वेब पटल पर Administration 🧢 DSW 🗢 Student Welfare Scheme) में अपना आवेदन अधिष्ठाता, छात्र कल्याण कार्यालय में दिनांक 31/05/2023 तक समस्त वांछित दस्तावेजों (पिछले सेमेस्टर/वर्ष के अंकसूची की कॉपी, BPL कार्ड की कॉपी, बैंक पासबुक एवं आधार कार्ड की स्वच्छ छाया प्रति) के साथ अनिवार्यतः प्रेषित करना सुनिश्चित करें।

नोट:— उक्त समस्त जानकारी गूगल फार्म (विश्वविद्यालय के वेब पटल पर Administration 🧢 DSW 🗢 Student Welfare Scheme) में भी आवश्यक रूप से दर्ज करें।

> 15-05.2023 (डॉ.एच.एस.होता)

अधिष्ठाता. छात्र कल्याण

बिलासपुर, दिनांकः 15/05/2023

क्रमांकः ४६३ / अ.छा.क. / २०२३ प्रतिलिपि:-

1. कुलपति महोदय के निज सहायक को, माननीय कुलपति महोदय के सादर सूचनार्थ।

2. कुलसचिव के निज सचिव को माननीय कुलसचिव के सूचनार्थ।

3. कार्यालयीन प्रति।

अधिष्ठाता, छात्र कल्याण

Atal Bihari Vajpayee Vishwavidaylaya, Bilaspur (C.G.)

APPLICATION FOR STUDENTS'WELFARE FUND TO POOR AND NEEDY STUDENT FOR THE STUDETS OF UG/PG COURSES OF UTD

1. Name of the student :			
2. Father's name:			_
3. Gender: M/F:			
L. Date of Birth:			
5. Category: (GEN/SC/ST/OBC) :			
6. Whether DA (Yes/No)			
7. Source of income of Family i. Govt	. Job ii. Private Job iii.	Agriculture iii.	Own business iv.
Any other.		C	
8. Annual Income from all sources			
(Attach proof)			
9. Level UG/PG:			
10. Class	Semester		
Department			
11. Amount of tuition fee paid in this se			
(Attach proof of receipt)			
12. Overall marks in just preceding year	perce	entage of marks	
(Attach self attested copy of mark sh		-	
13. Have you taken readmission in this s		on (Yes/No)	If
yes specify year and semester	_		
14. Do you have any back paper in any			 subject, semester
and year		, , ,	J
15. Have you availed this scholarship ea	arlier (If yes) give followi	ing detail	
Classsemester_			
16. Academic session in which seeking	for financial assistance	<i>J</i>	
7. Mailing address with mobile number			
8. Account detail: Name:	AC No		
Name of bank			
IFSC code			
9. E-Mail ID			
De	eclaration by student		
	·		
I hereby declare that the above informat	ion is true and complete	to the best of m	y knowledge. I am
aware that if any information herein is	found to be incorrect or	incomplete, my	y application form
will be rejected and Students' welfare	fund for poor and needy	v students to be	provided shall be
cancelled and tuition fee exempted will	=		1
cancence and tuition rec exempted win	oc returned paid by file w	rim penaity.	
Date		Signature, St	udent

Forwarded by HOD

This is certify that Mr./Ms(Studer	nt Name)	with	
Enrolment Nois	admitted in academic session	and studying in the	
department of (Name of department	ent)	(Class)	
(Semester)	As per the document	ts produced by him/her,	
	r getting student welfare fund as per elig	_	
	nd is being forwarded for the same.		
, and the second	Ç		
Date:	Head		
	(Signature an	Signature and Seal)	
Recommer	ndation by Students' welfare Commit	tee	
Certify that student	s	semester	
department	is eligible/not eligible to avail stu	dents' welfare as per the	
guidelines and hence recommende	ed/rejected the same.		
Date:			
Members		Dean Student Welfare	