

**SHAHEED BHAGAT SINGH COLLEGE
(UNIVERSITY OF DELHI)**

No.SBSC/

Date: 23-12-2022

N O T I C E

STUDENTS AID FUND : 2022-23

It is hereby notified for the information of the students that the last date to apply for getting Financial Assistance from the Students Aid Fund of the College **is extended till 5th January, 2023.**

Only those students whose family income is not more than Rs.1.75 lakh per annum may apply for the financial assistance. Students may obtain the **APPLICATION FORM** available on College Website, i.e., www.sbsc.in

Duly filled in form along with following documents, **self-attested**, must be submitted to Mr. R.P. Singh, Sr. P.A. to Principal latest by **Thursday, 5th January, 2023:**

1. Latest Income Proof (Income Certificate from Competent Authority / employer or BPL Ration Card or any other)
2. Photocopy of cancelled cheque/bank passbook of the student containing Bank Name, IFSC Code, Account Number
3. Photocopy of College I.D. Card
4. Photocopy of Category Certificate (SC/ST/PwBD/EWS/OBC), if any
5. Photocopy of marksheet of previous semester

Disbursement of aid fund will be recommended by the Committee.

Students may note that Affidavit will not be considered for income proof.

Note: College reserves the right to sanction the aid depending on the case notwithstanding of the above requirements in consultation with the Competent Authority of the College.



(Dr. Raj Kumar Rajan)
Convener, SAF Committee



(Prof. Arun Kumar Attree)
Principal

Copy to:

- Teachers-in-charge
- College Website
- SPA

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Paste recent
Photography

APPLICATION FORM FOR STUDENT AID FUND 2022-23

Note: The applicant is required to fill in the forms in his/her own handwriting carefully and correctly. Any statement made in this application, discovered to be incorrect at any time will render the applicant liable to disciplinary action.

1. Name of the applicant (in block letters) : _____

Roll No.: _____ Course/Year : _____ Mobile No.: _____

Email ID of the Student: _____

2. Father's Name : _____ Occupation/Designation _____

Income (annually): _____ Education: _____

3. Who is Supporting the Applicant: _____ Relation: _____

Occupation of the Supporter: _____ Occupation/Designation: _____

Total Income including allowances: _____

4. Number of Dependents on supporters: _____

Studying in College: _____ in School: _____ Nowhere: _____

5. Were you enjoying Student Aid Fund in the previous class? If so, state the amount: _____

6. No. of Encls.: _____

Date: _____

Signature of the Applicant

DECLARATION

I hereby declare that the particulars given above are correct to the best of my knowledge and belief.

Date: _____

Signature of the Applicant

RECOMMENDATION OF THE CONVENER, Rs. _____

CONVENER, SAF COMMITTEE

PRINCIPAL