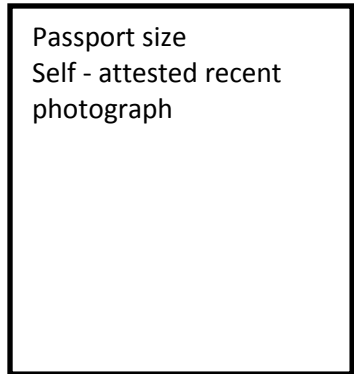


**OFFICE OF THE DEAN, STUDENTS' WELFARE
JAMIA MILLIA ISLAMIA, NEW DELHI-110025**

**Application Form for Dr. A. P.J. ABDUL KALAM SCHOLARSHIP 2017-18
(Last date for submission of application: January 31, 2018)**



1. Name of Faculty/Centre:.....
2. Name of Department:
3. Name of Course:.....Year/Sem....
4. Name of Student:.....Student ID.....
5. Fees Paid : (a) Amount.....(b) Scroll No.....Date.....
6. Male/Female/Others:
7. Father's/Husband's Name:
8. Nationality:9 . Date of Birth: (DD/MM/YYYY)
10. Present Address:
11. Phone No.:.....E-mail ID (if any).....
12. Family's Annual Income: (in words).....
13. %age of last examination:
14. Brief write up may be attached as separate sheet

Declaration:

I, hereby, declare that I have read the rules regarding the award of Dr. APJ Abdul Kalam Scholarship of Jamia Millia Islamia. I further declare that, to the best of my knowledge and belief, the particulars given in the form are correct. I shall inform the Dean, Students' Welfare if any stipend or financial assistance is awarded to me from any other source.

Place:

Date:

Signature of the candidate

Name (in Bold Letters)

Remarks of the Head/Dean/Director:

.....
.....
.....

Signature of the Head/Dean/Director with stamp