



APPLICATION FORM FOR SJVN SILVER JUBILEE MERIT SCHOLARSHIP SCHEME -2020

Deadline: This application form and all other required documentation must be received by 17th, November, 2021

Mail to: 1st Floor Shree Niketan (Near IT Bhawan) Mehli Shoghi Road Lower Panthaghati, Shimla -171013 (H.P.)

E-mail amarverma2310@gmail.com. Website: www.scholarship.himcon.org.

State Applied: Himachal Pradesh (All District) Uttarakhand (Only Uttarkashi & Chamoli District) Bihar (Only Buxar District)
 Maharashtra (Only Ahmednagar District) Gujarat (Only Surendernagar & Patan District)

Board: State Board CBSE/ICSE

Year of Passing 12th _____ **12th Percentage** _____ **Marks Obtained** _____ **Total Marks** _____

Applicant Details:

1. Name of Student : _____
(in Block Letters)

2. Father's Name : _____

3. Date of Birth : _____

4. Gender : Male Female

5. **Category:** Unreserved

General SC ST OBC Minority

Below Poverty Line (Attach Valid Certificate of BPL)

General SC ST OBC Minority

Person with Disabilities (Attach Valid Certificate of Disabilities)

General SC ST OBC Minority

6. E-mail : _____

7. Contact/Mobile Number : Student _____ Parents _____

8. Permanent Address:

State _____ Pin Code _____

9. Correspondence Address:

State _____ Pin Code _____

Recent photograph of candidate attested by the Principal of the Institute where the student has taken admission



10. Particulars of School/ Institution from where the student passed 12th Class

1. Name of School : _____
2. Address of School : _____

3. Name of District : _____
4. Name of Area/Panchayat : _____
5. Candidate belongs to Project Affected Area : YES NO
6. Candidate belongs to Project Affected Family : YES NO

(In reference to point no. 5 & 6 candidates are requested to kindly get the Annexure-2 certified by the SJVN Competent Authority without Annexure-2 candidates will not be considered under Project Affected Area/Project Affected Family)

7. Name of Board : _____
8. Roll No. on Class 12th Examination : _____
9. Year of Passing Class 12th Examination : _____
10. Total Marks Obtained : _____
- (Attached Attested copy of Mark Sheet)
11. Total Marks : _____
12. Percentage of Marks : _____
13. In case of grade system its Equivalent : _____
- Percentage

11. Detail of Student Bank Account (in Block Letters)

- a. Name of Applicant in Bank Account : _____
- b. Name of Bank : _____
- c. Name of Branch : _____
- d. Account Number : _____
- e. IFSC Code : _____

(Please attached the copy of Pass Book)

- **Kindly enclosed the Annexures along with the Form, without Annexures it will be rejected**



Certification Statement:

I do hereby declare that I am not receiving any scholarship from any Institute/Govt./PSU etc.

By signing my name below, I confirm that all of the information provided above and the accompanying documents is true and correct to the best of my knowledge.

I do understand that submission of Application Form doesn't mean that the candidate/applicant is eligible for scholarship.

SJVN/HIMCON will not be responsible for any delay in receiving the application form. Applicants are advised to avoid last moment rush to submit their application and they should submit their application well in advance before the deadline. The SJVN/HIMCON shall not be liable for failure of submission of application by the applicant that may arise due to any reason whatsoever. No such requests of the candidates will be entertained by SJVN/HIMCON.

Name of Applicant _____

Signature of Applicant: _____

Date: _____

Please send the Filled Application Form on following Address:

Himachal Consultancy Organisation Limited (HIMCON)

1st Floor, Shree Niketan, (Near IT Bhawan), Mehli Shoghi Road,
Lower Panthaghati, Shimla-171013 (H.P.)



Annexure-1

“TO WHOM IT MAY CONCERN”

(This is to be issued/furnished on the letter head of the College/Institute)

We do hereby certify the credentials of the Student as under:-

1. Name of Student :
2. Father's Name :
3. Address :
.....
.....
4. Year of Enrolment :
5. Course Name :
6. Course Session :
7. Course Duration :
8. Roll No. :

Date:

**Signature of Principal/Head
with Seal of the College or Institute
with Stamp**



Annexure-2

“TO WHOM IT MAY CONCERN”

(This is to be issued/furnished on the letter head of SJVN Limited)

(Applicable for students belonging to Project Affected Family/Project Affected Area only)

We do hereby certify that the following Student belongs to **Project Affected Family/
Project Affected Area**

1. Name of Student :
2. Father's Name :
3. Address :
.....
.....
4. Belongs to : Project Affected Family
: Project Affected Area
: Project Affected District

Date:

**Signature of Concerned Project Authority
SJVN Limited**