

B/2009/1001

PLEASE READ GENERAL INFORMATION AND INSTRUCTIONS CAREFULLY BEFORE FILLING IN THE APPLICATION FORM

**APPLICATION FORM FOR MERIT AND NEED BASED SCHOLARSHIP FOR HIGHER STUDIES IN INDIA
FOR INDIAN WOMEN FROM PUNE AND PUNE DISTRICT**, BELOW 30 YEARS OF AGE**

** PUNE DISTRICT INCLUDES 13 TALUKAS ONLY : Ambegaon, Baramati, Bhore, Daund, Haveli, Indapur, Junnar, Khed, Maval, Mulshi, Purandar, Shirur & Velha.

(Category "B")
Indian

Rs. 300/- Each

Terms and conditions for scholarship entitlement :-

- A Age limit : 30 years.
- B Family's total annual income not to exceed Rs 4,50,000/- per annum.
- C A First Class academic record is necessary for consideration of a student's application for a scholarship.
- D The scholarship amount will be decided on merit and need but will not exceed Rs. 50,000/-
- E The Scholarship will be considered for 2nd year also depending on the academic result of the 1st year.

If awarded a scholarship, payment will be made against evidence of actual expenses incurred.

List of documents to be attached with the application :

a) One copy of each of the following (Attested Copies only)

- Proof of age.
- Proof of residence in Pune District (School & Junior College Leaving Certificates).
- Academic Record: Secondary School (Std. X), Higher Secondary (XII), Degree Certificates and marksheets.
- Work experience Certificates (From Employer), if employed.
- Admission Letter from Institute/University.
- Family Income i.e. Salary Certificate or Last I.T. Assessment Order or last three months salary slips.

b) Original +9 copies of each of the following

- Statement of Purpose for Lila Poonawalla Foundation Scholarship (*See Details Below).
- Two references with full addresses, telephone numbers, E-mail id. and occupation/profession.
- Latest Passport size colour photographs.

* A Statement of Purpose in English which should be an essay of NOT MORE THAN 500 WORDS

About yourself as an Individual, Your Aims & Ambitions, Achievement and Developments towards your aims, How would you use your knowledge towards social and economic development in India at large, Future Plans.

Warning: Statement exceeding 500 words will get less points, bringing down your total score.

Please submit your form in a sealed envelope with Form No. mentioned on top, at Lila Poonawalla Foundation, Akshay Centre, Office No. 8, 1st Floor, Thergaon, Chinchwad, Pune 411033. (Near Santosh Mangal Karyalaya)

For any queries please contact: Ms. Vidya Khutwad.

Telephone : +91-20-66302610 / 66302611, Email : vidya@lilapoonawallafoundation.com

State the name and address of the university where admission has been secured for the proposed course, or expected to be secured.

Estimated Total cost for the proposed course for one year towards :

Tuition Fees:	Rs.	
Hostel Expenses : (If Applicable)	Rs.	
Other Charges : (Like lab, Library etc.)	Rs.	
Total :	Rs.	

③ Work Experience & Field of Study:-

(Attach an additional Sheet if necessary)

Details of present employment (if any):- _____

Period of employment : _____ Annual Salary drawn Rs.: _____ Position held : _____

Name of the Employer : _____

Address : _____ Tel. No.: _____

④ Family background with income details (Father / Mother / Husband / Brother / Sister :-

(If parents have retired please give details of retirement benefits and also please indicate how many additional members of the family are studying and how many are working - Attach an Additional Sheet if necessary)

	Name	Qualification	Occupation	Gross Annual Income	Office address & Tel. No.
i. Father					
ii. Mother					
iii. Husband					
iv. Brother/Sister					
v. Brother/Sister					
vi. Any other Dependent(s)					
TOTAL					

⑤ **State other sources of financial help (promised or expected by giving the break up below) from University, Parents, Guardians, Friends, Educational Trusts and own resources :-**

⑥ **Please indicate the Source/s which influenced your decision to apply for the Lila Poonawalla Foundation Scholarship**

I certify that all the information submitted by me as part of this application is complete & accurate.
I undertake to keep the Foundation informed of any change in my course of studies or address.
I also agree to send my progress report every quarter.

Date :

Applicant's Signature

APPROVAL OF PARENT / HUSBAND / GUARDIAN

Full name of Parent / Husband / Guardian _____
First Name Middle Name Surname

Signature of Parent/Husband/Guardian

This application must be completed & signed by the applicant. The Trustees of the foundation will not review an unsigned or incomplete application submitted without the complete set of documents listed on the first page. Decision of the Board of Trustees is binding & final.
