

KODAVA SAMAJA EDUCATION FUND BANGALORE

#7, 1st Main Road, Vasanthanagar, Bangalore- 560 001
Ph.080-22260188, E-mail - kodavasamajblr@gmail.com

www.kodavasamajbangalore.org

CLASS / COURSE

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AFFIX
PHOTO

APPLICATION FORM FOR SCHOLARSHIP (2024 – 25)

(To the Students of the Members of Kodava Samaja Bengaluru Only)

LAST DATE: 25th Nov 2024

(Read the Instructions / Conditions carefully before filling this form)

1.	Name of the Applicant (Student) (in Capital Letters with Family Name)																					
	ಕೊಡವ ತಕ್ಕಲ್ - (ಕೊಡಂದೆರ ಎಂ ಕಾರ್ಯಪ್ಪ)																					
2.	Date of Birth and Age D.O.B... Age.....	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
3.	Sex (Tick the appropriate)	Male <input type="checkbox"/> Female <input type="checkbox"/>																				
4.	Father's Name																					
5.	Mother's Name with Thamane Name																					
6.	Kodava Samaja Bengaluru Membership No. a) Father b) Mother c) Self (if applicable)																					
7.	Occupation of Parents																					
8.	Annual income of parents																					
09.	Whether availed Scholarship from Kodava Samaja Education Fund earlier, if so, mention the course & year.																					
10.	Particulars of Examination passed for availing scholarship. (Indicate only the marks of the specific class / semester for which scholarship is to be awarded). Enclose Self attested xerox copy of the Marks Sheet.																					
	Class / Course / Degree	Semester	% of marks Secured	CGPA / SGPA	Name of School / College / Institution																	
		Sem – 1 Sem – 2 Sem – 3 Sem – 4 Sem – 5 Sem – 6																				
	Total :																					
11.	Specify the Class / Course presently studying																					
12.	Duration of the Course studying (Specify year & Semesters)	Year : Semester :																				

13.	Name of the institution presently studying (With original study certificate)	
14.	Postal Address for communication and sending the scholarship Cheque (Please furnish correct postal address with pin code)	
15.	Name of the Bank Name of the A/c Holder A/c Number. IFSC Code No. Name of the Branch	
16.	Contact details. a) Mobile No. b) Land Line c) Email id.	

I hereby declare that the information furnished above is true and correct.

Place:

Signature of the Applicant.....

Date:

Name of the Applicant.....

Instructions / Conditions: -

1. **Enclose the copies of documents for proof (Marks card, Study Certificate and other relevant documents with self-attested).**
2. Incomplete application will not be considered.
3. Application must be signed by the applicant himself/herself.
4. One passport size photograph to be affixed.
5. Duly filled application along with relevant documents should reach the office of the Kodava Samaja, Bangalore either by hand or by post on or before **25th Nov 2024**. **Late application will not be considered.**
6. **The Scholarship is only for those who are continuing their studies.**
7. **Decision of the Education Fund Committee is final.**
8. For any clarification, contact the Kodava Samaja Office (Ph. No. 080-22260188 / 22351088) or Secretary, Education Fund (M – 9844315949 / 9986880636 / 9844264188)

CONDITIONS / REGULATIONS FOR THE AWARD OF SCHOLARSHIP FOR THE YEAR 2024 – 25.

(1) Classification of Classes / Courses / Degree / Examinations, percentage of marks fixed and conditions for the award of Scholarship:

Sl No	Class / Course / Degree	Marks / Conditions
1.	10 th Standard Equivalent - SSLC / CBSE / ICSE / IGCSE	85 % & Above
2.	12 th Standard Equivalent - II PUC / ICSE / CBSE	85 % & Above
3.	Diploma / ITI / JOC / Vocational Courses	65 % & Above
4.	Bachelor's Degree - B.A./B. Com/BBM/BSW/BHM/BCA/BMS/BBA/B. Sc (All other degree – 3 / 4 years duration) etc.	75 % & Above
5.	B.Ed, BP. Ed, BASLP, etc.	70 % & Above
6.	Professional Degree - B.E/B.Arch/B Tech/B.Sc Agri & (Allied Courses) B.Sc. Nursing, etc.	75 % & Above
7.	LLB & Honours, LLB (Spl), BPT, BVA, B.Pharm, etc.	55 % & Above
8.	LLM & Honours/MPT/MASLP/M.Ed/M.P.Ed/M.Pharm/D.Pharm, etc.	50 % & Above
9.	Post Graduation - M.A./M.Com./MBA/MSW/M.Sc./MCA/M.Tech/ME, etc.	70 % & Above
10.	Professional Post Graduation – MS, MHM, MMS, M.Sc. (Allied Courses), etc.	70 % & Above
11.	Bachelor of Medicine - MBBS/BDS/BVSc. etc.	55 % & Above
12.	Post Graduation Medicine - MD/MS/MVSc. etc.	50 % & Above

(II) Eligibility criteria for the award of scholarship.

The marks of the following semesters only will be considered for the award of scholarships:
(Not Applicable to SSLC, CBSE, ICSE & PUC)

- a. **First semester** marks, if the studying course is of one-year duration comprising two semesters.
- b. **Second semesters** marks, if the studying course is of two-year duration comprising four semesters.
- c. **Fourth semester** marks, if the studying course is of three-year duration comprising six semesters.
- d. **Fourth semester** marks, if the studying course is of four-year duration comprising eight semesters.
- e. **Sixth semester** marks, if the studying course is of five- years duration comprising ten semesters.

All the applications who are eligible for the scholarship as per the above criterion should have passed in their previous semesters and should be studying in the immediate next semester.

(NOTE: Students of other semesters are not eligible for scholarship)

(III) Eligibility criteria for the award of low-income group (Need based) Scholarship:

The Minimum marks stipulated by the committee to avail Low-income (Need based) scholarship is 50% and above.

(iv) Particulars of Documents to be enclosed along with application:

1. Xerox copies of Marks Card / All Semester Marks Card. (Self Attested).
2. **Original study certificate from the present college / institution studying, bearing the signature of the principal / Head of the Institution with seal and date.**

Applications which are not accompanied by the above documents will be rejected.

Please send your duly filled application on or before **25th Nov 2024** to
The Secretary, Kodava Samaja Education Fund, # 7, 1st Main Road,
Vasanthanagar, Bangalore – 560 001