

KODAVA SAMAJA EDUCATION FUND BANGALORE

#7, 1st Main Road, Vasanthanagar, Bangalore- 560052
Ph.080-22260188, E-mail- kodavasamajblr@gmail.com
www.kodavasamajbangalore.org

CLASS / COURSE

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AFFIX
PHOTO

APPLICATION FORM FOR SCHOLARSHIP (2017 – 18)

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

LAST DATE : 10th Nov 2018

(Read Instructions / Conditions carefully before filling this form)

1.	Name of the Applicant (Student) (in Capital Letters with Family Name)																			
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></tr><tr><td></td><td></td><td colspan="6"></td></tr></table>																		
3.	Sex (Tick the appropriate box)	Male	Female																	
4.	Father's Name																			
5.	Mother's Name along 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 (Enclose Income certificate of current year in original, if availing scholarship under Low income group). No income certificate required for Merit candidates.																			
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	Name of School / College / Institution															

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 study certificate)	
14.	Postal Address for communication and sending the scholarship Cheque (Please furnish correct postal address with pincode)	
15.	Name of the Bank & Branch Name Name of the A/c Holder A/c Number. IFSC Code No.	
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, Income Certificate of the parents 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 **10th Nov 2018**. Late application will not be considered.
6. The Scholarship is only for those who are continuing their studies.
7. **Decision of the Fund Committee is final.**
8. For any clarification, contact the Kodava Samaja Office (Ph. No. 080-22260188 / 22351088) or Secretary, Education Fund (M – 9449002741/9844315949/9900544800)

CONDITIONS / REGULATIONS FOR THE AWARD OF SCHOLARSHIP FOR THE YEAR 2017 – 18.

(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)	90 % & Above
2.	12 th STANDARD EQUIVALENT (II PUC / ICSE / CBSE)	90 % & Above
3.	Diploma / JOC / Vocational Courses	70 % & Above
4.	Bachelors Degree (B.A., B.Com, BBM, BSW, B.Sc, BCA, BHM, etc.)	70 % & Above
5.	Professional Degree (B.E., B. Arch, B Tech, L.L.B., B.Sc Ag, B.Sc (Fisheries), BPED, B. Sc (Forestry) etc)	70 % & Above
6.	Post Graduation (M.A., M.Com., MBA, MSW, M.Sc., M.Sw, MCA, MPED, etc.)	65 % & Above
7.	Professional Post Graduation (MS, LLM, M.Sc [ag], M.Sc Fisheries, M.Sc Forestry etc)	65 % & Above
8.	Bachelors of Medicine (MBBS, BDS, BVSc, etc.)	55 % & Above
9.	Post Graduation Medicine (MD, MS, MVSc etc.)	55 % & 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 card – of 1 year course.
- b) **Second Semester** Marks card – of 2 years course.
- c) **Fourth Semester** Marks card – of 3 years course.
- d) **Fourth Semester** Marks card – of 4 years course.
- e) **Sixth Semester** Marks card – of 5 years course.

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:

1. The Minimum marks stipulated by the committee to avail Low-income (Need based) scholarship is 50% and above. Any Application whose mark is less than 50% is not eligible for any scholarship. This apart, all other conditions and criteria applicable to other applicants are also applicable to LIG scholarship applicants.
2. Students from Bangalore city whose family income is less than Rs. 2,00,000 (Two Lakh Only) per annum are eligible to apply for low income group scholarship. Income or Salary certificate of the parents needs to enclosed with the application, other conditions remain the same.
3. For students from outside Bangalore city the Low income ceiling fixed by Government of Karnataka is applicable. Low income certificate issued by the tasildar for the current year needs to be enclosed, other conditions remain the same.
4. The applications for LIG scholarship should be supported by two reference from the **village or locality or area** where the applicant is residing and both the reference will have to be Kodavas. (See last page of the application).

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

1. Xerox copies of 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.
3. Income certificate of parent for the current year (for LIG scholarship applicants only).

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

Reference: (Only for Low-income group Scholarship Applicants).

First Reference:-

I, Mr. / Mrs. _____

Residing in _____ hereby declare that,

I know Mr. /Ms. _____ for the

last _____ years. In my opinion his / her application can be considered for Low – income Scholarship by Bangalore Kodava Samaja.

Date:

Signature _____

Name with Family Name _____

Phone _____

Second Reference:-

I, Mr. / Mrs. _____

Residing in _____ hereby declare that,

I know Mr. /Ms. _____ for the

last _____ years. In my opinion his / her application can be considered for Low – income Scholarship by Bangalore Kodava Samaja.

Date:

Signature _____

Name with Family Name _____

Phone _____

Please send your duly filled application on or before **10th Nov 2018** to
The Secretary, Kodava Samaja Education Fund, # 7, 1st Main Road,
Vasanthanagar, Bangalore - 560052