## KADUR SEETHARAMAIAH PARVATHAMMA CHARITABLE TRUST

"As our forebears did for us, so have we done for our children and given them the gift of education and health"

290, 34TH CROSS, 9TH MAIN, 4TH BLOCK, JAYANAGAR, BANGALORE 560 011 TELEPHONE.: 2653 2516							
APPLICATION FOR INTEREST - FREE LOAN SCHOLARSHIP Application No. Date							Passport size
	RITE IN CAPITAL LETTERS. INCOMPI						
1. NAME:			First)	KFFLIC	(Middle)	LL BE REJECTED	
1. 1 17 17 17 12 .	Lusty	(-	i ii sij		(Minuic)		
2. Age:	3. Date of birth: (DD/MM/YYYY //	-/	4. Gender: M	F 🗌	5. Married:	Yes No No	Applicant's Photo
6. Present R	esidence & Mailing Address:						
E-mail addre	ess:	Tel	ephone : (City C	ode		(Number	
7. Permanen	t Residence & Mailing Address:						
		Tele	ephone: (City Co	de		(Number	)
8. Father's /	Guardian's Name: (Last)	(First)		(Mi	iddle)		
9. Mother's / Guardian's Name: (Last) (First) (Middle)							
10. Parent's Permanent Residence & Mailing Address:							
		Tel	ephone: (City Co	ode		(Number	)
11. Father's / guardian's Occupation: (Specify)  Annual Salary:							
12. Mother's	12. Mother's / guardian's Occupation: (Specify)  Annual Salary:						
13. Name Of Educational Institution You Are Enrolled:							
	- 6						
	of course you are enrolled: of course you are enrolled:						
	ead of Institution :	Telep	hone: (City Cod	le		(Number	
14. Are you a Merit Student? Y N 15. How Many Brothers ,Sisters . 16. Tell us what the brothers & sisters are doing at the present time. If they are studying list their expenses. (Add additional sheets if necessary)							
17. Membership in School & College Extracurricular Activities (Including Varsity & Community Organizations):							
						(Add addition	al sheets if necessary)
18. Are you Interested in Studying Abroad ? Y If Yes, Explain:							
						(Add addition	al sheets if necessary)
19. Are you Currently Employed? Y / 20. Where? 21. How Many Hours Per Week?							
22. Please write a concise personal statement either in English or Kannada (no longer than 250 words) that describes your values, aspirations & goals. As a responsible citizen what contributions you expect to make to the community you live in and the society at large?  Statement Attached: YN							
23. Please write an essay in your own words either in English or Kannada (no longer than 500 words) explaining why you need financial assistance and explain the basis of your "need".							

## APPENDIX 1: BIOGRAPHICAL SKETCH

## PLEASE WRITE IN CAPITAL LETTERS. INCOMPLETELY FILLED-OUT APPLICATION WILL BE REJECTED.

1. NAME: (Last)	(First)		(Mie	ddle)
2. Name of town / village you o	consider your home:		Stat	e:
3. Name of high school attende	d: City:		State:	
4. Name of your school / Year of course you are s	· ·		•	ing:college?
5. Major area / s of interest : Humanities / Social Science		istry O Engineering O (Please Specify):	Computer Science O	Mathematics O Physics O (Tick all that apply)
6. Emphasis in Major / Optiona	ıl (If applicable)			
7. Do you plan to attend poswhat degree will you seek? F			•	know yet O If yes / probably,
· ·	own business O	Private practice of my	profession O Gove	Research O Work in industry O
9. List the clubs and orga	anizations you are	involved in		
10. List your hobbies & interes (d)	ts (a) (e)	(b) (f)		(c) (g)
11. Do you participate in sports	s? Y□N□If yes, v	which sports?		
12. Are you involved in any kir	nd of volunteer work	? please specify.		
13. Have you done any kind of	academic research?	If so what kind?		
14. Awards and honors (Acader	nic & Social):			
15. Please share with us any oth	her important accomp	plishments not listed above	e (attach additional sheet	if necessary):
16. Assuming your scholastic s necessary):	uccess how do you so	ee yourself 5 years and 10	years from now? (attach	additional sheet if

## APPENDIX 2: STUDENT'S & PARENT'S INCOME, EXPENSE AND ASSETS PLEASE WRITE IN CAPITAL LETTERS. INCOMPLETELY FILLED-OUT APPLICATION WILL BE REJECTED. Student's Name: (Last) (First) (Middle) Father's / Guardian's Name: (Last) (First) (Middle) Mother's / Guardian's Name: (Last) (First) (Middle) **STUDENT** PARENTS/GUARDIANS ANNUALINCOME Rs.----Total Salary or Pension Income Rs.----Rs.-----**Business Income** Rs.----Rs -----Rs.----Rental Income Rs -----Rs -----Other Income Rs.----TOTAL ANNUAL INCOME Rs.----AVERAGE MONTHLY EXPENSES INCURRED IN YOUR FAMILY: Rs.----Rent/Mortgage Rs.----Food/Groceries Rs.----Clothing Rs.----Gas/Electricity Rs.----Water Phone Rs.----Rs.----Petrol Vehicle (Scooter, motor cycle, car etc.) Rs.----Payment Rs.----Vehicle Insurance Rs.----Bus fare Rs.----Medical Rs.----Tuition Fee Other Fee (Explain.....) Rs.----Hostel Fee Rs.----Books Rs.----Equipments, Tools & Instruments Rs.----Travel (between city of location of school / college and home town) Rs.----TOTAL MONTHLY EXPENSES

FAMILYASSETS								
	STUDEN	Т	PA	ARENTS/GUARDIANS				
CASH IN SAVINGS, CURRENT & DE	POSITACCOU	JNTS (List Banks	& Other In	stitutions):				
Bank:	Rs		Rs					
Bank:	Rs		Rs	5				
Post Office:	Rs		Rs	,				
Cash:	Rs		Rs					
HOUSE AND REAL ESTATE	STUDEN	T	PA	ARENTS/GUARDIANS				
Do you own a house, site or agricultural land	? Yes□ No		Ye	es□ No□				
Current Market Value of house	Rs		Rs					
Current Market Value of site	Rs		Rs					
Current Market Value of Agriculture land	Rs		Rs	5				
BUSINESS	STUDEN	T	PA	ARENTS/GUARDIANS				
Do you own a business?	Yes □ No		Ye	es□ No□				
If yes, explain the nature of the business								
OTHERASSETS	STUDEN	T	PA	ARENTS/GUARDIANS				
Car	Rs		Rs	5				
Scooter or Motor cycle	Rs		Rs					
Bicycle	Rs		Rs					
Mobile Phone	Rs		Rs					
Student and parents/guardians must sign and date this application. By this signature I/we attest to the accuracy and truthfulness of the information provided. The information is complete and correct to the best of my/our knowledge. I/We understand that any willful misinformation or misrepresentation will disqualify the eligibility for loan scholarship and that I/We may be liable for legal action.								
Student's Signature	Date							
		Parent's Address	:					
Parent's / Guardian's Signature	Date	Tel No.	:					
Parent's Name (In Capital Letters)								
Witness's Signature	Date	Witness's Address	s :					
	Date	Tel No.	:					
Witness's Name								