## BONAFIDE CERTIFICATE FOR RENEWAL OF SCHOLARSHIP (USE BLUE INK PEN ONLY)

1.	Name of Student	Ms/Mr.					
2.	Name of College						
3.	Name of Course (Full Form)						
4.	Name of Branch/Stream of C						
5.	Total Duration of Course (In						
6.	College/Institute Joined on (Academic Year)			MonthYear			
7.	Course will complete in			MonthYear			
8.	He / She is continuing the course in			2nd / 3rd / 4th / 5th year. (Tick out)			
9.	Whether Student is getting any other scholarship/ stipend/			(a) Write YES / NO			
	financial assistance from College/ Institute/State Govt or			(b) If <b>YES</b> , then mention total getting amount of			
	from any other sources/agencies.			Rs per month/ year/ semester* (*Tick appropriate)			
	Note:- EXCLUDING PM SCHOLARSHIP AMOUNT)			(c) Source/ Agency of Scholarship			
10	Ctudent has successfully see	h ((Tick out) and accord the following marks in each					
10 Student has successfully completed his/her 1st / 2nd / 3rd / 4th ((Tick out) and scored the following marks in each semesters/year without RA/Fails (Student to upload conversion formula where grades converted to marks)							
	Year			Mark sheet	Maximum		Percentage
		on (Month & Year)	Declared on (Month &	issued by university on	Marks	Obtained	
		G i cai)	Year	(Month & Year)			
	1st Year (1st & 2nd sem)						
	2nd Year (3rd & 4th sem)						
	3rd Year (5th & 6th sem)						
	4th Year (7th & 8th sem)						
It is certified that above student has cleared all subjects in <b>FIRST ATTEMPT</b> , scored <b>50% and above</b> marks in							
each semester/academic year, did not FAIL/ RA/ REPEAT in any subject.							
Date Round Stamp of							
Place College/Institute							
(Signature)#							
(Rubber Stamp of signing official must be affixed) # Signature of VC/Principal/Vice Principal/Dean/Associate Dean/Registrar/Deputy Registrar/Director/Deputy							
Director only will be considered. 'For' signature will not be accepted.							
Instructions Cum Certificate from students Use Blue ink pen only. Do not overwrite or use correction pen / whitener and LEAVE ANY COLUMN BLANK							
<ol> <li>Use Blue ink pen only. Do not overwrite or use correction pen / whitener and LEAVE ANY COLUMN BLANK otherwise application will be rejected.</li> </ol>							
2. Signature of Vice Chancellor/Principal/Vice Principal/Dean/Associate Dean/Registrar/Deputy Registrar/Director/							
Deputy Director only will be considered on bonafide certificate, otherwise application will be rejected. 3. Student must clear each subject in all semesters/academic year in <b>FIRST ATTEMPT</b> , uninterrupted to qualify for							
renewal of scholarship. Any instalment can be claimed within <b>ONE YEAR OF DECLARATION OF RESULT.</b>							
4. I have read and understood the Check List, FAQ and Instructions available on website www.ksb.gov.in. I also							
certify that information provided by me is correct and true to best of my knowledge. I have not forged or given any wrong information, if found, my application is liable to be rejected and I will be solely responsible for the same.							
5. I am also liable to <b>refund</b> the earlier scholarship amount already paid to me erroneously due to <b>clerical error</b> and							
will not claim as a matter of right once detected subsequently for wrong selection.							
	nature of ESM) ned of ESM/Widow	(Signature of Student) Name of Student					
Date		Date					