

प्रशासन/ UT Administration of
संघ शासित प्रदेश दादरा एवं नगर हवेली/ Dadra & Nagar Haveli
(शिक्षा निदेशालय) (Directorate of Education)
सिलवासा - ३९६२३०/ Silvassa - 396 230



F.No.DOE/GNL/PMS/ST/2019-20/8377

Date: 14/10/2019

NOTICE FOR INVITING APPLICATION
POST MATRIC SCHOLARSHIP

The Director of Education, Dadra & Nagar Haveli, Silvassa invites Post Matric Scholarship application (off-line) for the Academic Year 2019-20 from the students belonging to Scheduled Tribe (ST), Scheduled Caste (SC), Other Backward Class (OBC) and Economically Backward Class (EBC) having domicile of the UT of Dadra & Nagar Haveli studying at post matriculation or post-higher secondary stage to enable them to complete their higher education.

The eligible students may download and print-out the application form from the official website of the Administration of Dadra & Nagar Haveli www.dnh.nic.in or www.rmsadnh.webs.com and submit their duly filled application by Registered Post/Speed Post /By hand along with all the mandatory documents to the following address on or before 15/11/2019. (Applicants submitting their application form by hand should visit office between 3p.m. to 5p.m.)

Please Note : No application forms will be accepted after the due date under any circumstances.

Directorate of Education,
1st Floor, Block - 5,
PWD Complex,
Dadra & Nagar Haveli,
Silvassa.

Sd/-
Director of Education
e-mail : doe-dnh@nic.in
Ph.No. : 0260-2642098

प्रशासन
संघ शासित प्रदेश दादरा एवं नगर हवेली
(शिक्षा निदेशालय)
सिलवासा - 396 230



F.No.DOE/GNL/PMS/ST/2019-20 / 8377

दिनांक: 14 /10/2019

आवेदन निमंत्रण की सूचना

निदेशक (शिक्षा), दादरा एवं नगर हवेली, सिलवासा द्वारा दादरा एवं नगर हवेली, संघ प्रदेश के अनुसूचित जनजाति (ST), अनुसूचित जाति (SC), अन्य पिछड़ा वर्ग (OBC) और आर्थिक रूपसे पिछड़ा वर्ग (EBC) डोमिसाइल धारक छात्र /छात्राओं से शैक्षणिक वर्ष 2019-20 के लिए उनकी उच्च शिक्षा (पोस्ट मैट्रिक या पोस्ट हायर सेकंडरी) पूरी करने के हेतु पोस्ट मैट्रिक छात्रवृत्ति आवेदन (ऑफलाइन) आमंत्रित किया जाता है।

योग्य छात्र /छात्राएं दादरा एवं नगर हवेली प्रशासन की आधिकारिक वेबसाइट www.dnh.nic.in या www.rmsadnh.webs.com से आवेदन पत्र को डाउनलोड कर प्रिंट कर सकते हैं और रजिस्टर्ड पोस्ट /स्पीड पोस्ट /प्रत्यक्ष रूप में अपने आवेदन को सभी आवश्यक दस्तावेजों के साथ दिनांक 15/11/2019 को या इससे पहले निम्नलिखित पते पर जमा करा सकते हैं। (प्रत्यक्ष रूप से आवेदन पत्र जमा करने का समय अपराह्न 3 मे 5 है ।)

नोट : किसी भी परिस्थिति मे दिनांक 15/11/2019 के बाद आवेदन पत्र स्वीकार नहीं किये जायेंगे ।

शिक्षा निदेशालय,
प्रथम तल, ब्लॉक -5,
पीडब्ल्यूडी परिसर,
दादरा और नगर हवेली,
सिलवासा

Sd/-
शिक्षा निदेशक
e-mail : doe-dnh@nic.in
Ph.No. 0260-2642098

વહીવટી તંત્ર,
દાદરા અને નગર હવેલી (સં.પ્ર.)
(શિક્ષણ નિયામકની કચેરી)
સેલવાસ - 396230



F.No.DOE/GNL/PMS/ST/2019-20/8377

તારીખ: 14/10/2019

અરજી આમંત્રણ સૂચના

શિક્ષણ નિયામક, દાદરા અને નગર હવેલી, સેલવાસ દ્વારા દાદરા અને નગર હવેલી કેન્દ્રશાસિત પ્રદેશના અનુસુચિત જનજાતિ (ST), અનુસુચિત જાતિ (SC), અન્ય પછાત વર્ગ (OBC) અને આર્થિક રીતે પછાત વર્ગ (EBC) પરિવારના વિદ્યાર્થીઓ પાસેથી શૈક્ષણિક વર્ષ 2019-20 માટે તેમના પોસ્ટ મેટ્રીક્યુલેશન અથવા પોસ્ટ-હાયર સેકન્ડરી શિક્ષણને પૂર્ણ કરવા માટે પોસ્ટ મેટ્રિક શિષ્યવૃત્તિ અરજી (ઓફ-લાઇન) આમંત્રિત કરે છે.

પાત્રતા ધરાવતા વિદ્યાર્થીઓ દાદરા અને નગર હવેલીની વહીવટી તંત્રની સત્તાવાર વેબસાઇટ www.dnh.nic.in અથવા www.rmsadnh.webs.com પરથી આ અંગેના ફોર્મ ડાઉનલોડ કરીને પ્રિન્ટ કરી શકે છે અને રજિસ્ટર્ડ પોસ્ટ / સ્પીડ પોસ્ટ / રૂબરૂમાં તારીખ 15/11/2019 ના રોજ અથવા તે પહેલાં નીચેના સરનામે જમા કરવાનાં રહેશે. (રૂબરૂ અરજી જમા કરાવવાનો સમય બપોરે 3 થી 5 રહેશે).

નોંધ : - કોઈ પણ પરિસ્થિતિમાં તારીખ 15/11/2019 પછી અરજીપત્ર સ્વીકારવામાં આવશે નહીં .

શિક્ષણ નિયામકની કચેરી,
પ્રથમ માળ, બ્લોક -5,
પી.ડબલ્યુ.ડી. કોમ્પ્લેક્સ,
દાદરા અને નગર હવેલી,
સેલવાસ- 396 230.

Sd/-

શિક્ષણ નિયામક

e-mail : doe-dnh@nic.in

Ph.No. 0260-2642098

प्रशासन
UT Administration of
संघ शासित प्रदेश दादरा एवं नगर हवेली
Dadra & Nagar Haveli
(शिक्षा निदेशालय)
(Directorate of Education)
सिलवासा - ३९६२३०
Silvassa - 396 230



UT of D&NH Scheme of Post - Matric Scholarships to the students belonging to the Schedule Tribe of the Union Territory for the Academic Year 2019-20.

**APPLICATION FORM FOR THE POST MATRIC SCHOLARSHIPS
TO SCHEDULED TRIBE (ST) STUDENTS**

(To be submitted to the Directorate of Education
on or before **15.11.2019 between 3p.m. to 5p.m.**)

Space for
Photograph

PART - A
(To be filled in by the applicant)

| Sr.No | Particulars | | | |
|-------|---|------------------------|-------------|--|
| 1. | Name in full of Student (Block Letters only) | | | |
| 2. | Date of Birth | | | |
| 3. | Male/Female | | | |
| 4. | Father's Name | | | |
| 5. | Mother's Name | | | |
| 6. | Nationality | | INDIAN | |
| 7. | Caste/Tribe | | ST | |
| 8. | Whether married or single | | | |
| 9. | If married Husband's Name | | | |
| 10. | Full Address of the Applicant with Phone No. | | | |
| | | | Mob. No. :- | |
| 11. | Annual Income Details : (a+b+c = d) | | | |
| | (a)Applicant | (b)Father/ Husband. | (c) Mother | (d) Total annual income for year ending 31 st March 2019 |
| | | | | |
| 12. | (a) Father's Occupation | | | |
| | (b) Husband's Occupation | | | |
| | (c) Mother's Occupation | | | |

| | | | | | |
|--|---|---------------------------|--|------------------------------------|---------|
| 13. | (a) Name of the Guardian | | | | |
| | (b) Relation with the Applicant | | | | |
| | (c) Address of the Guardian | | | | |
| | (d) Occupation of Guardian | | | | |
| | (e) Total Annual Income for the year ending 31 st March 2019 | | | | |
| 14. | Particulars of examination taken starting with matriculation (please attach attested copies of certificates / marks sheet). | | | | |
| 14.(a) | Name of Examination | Year in which passed | Whether passed or not. In case of Last exam. Passed, indicate percentage of marks and Division | Institution and University / Board | Remarks |
| | 1 | 2 | 3 | 4 | 5 |
| | S.S.C. | | | | |
| | H.S.C. | | | | |
| | F.Y. () | | | | |
| | S.Y. () | | | | |
| | T.Y. () | | | | |
| | | | | | |
| | | | | | |
| 14.(b) | Any break in educational career should be mentioned indicating what he /she were doing during this period). | | | | |
| | Name of Examination last appeared before break | Year in which break taken | | Activity during gap period | Remarks |
| | | From | To | | |
| | 1 | 2 | 3 | 4 | 5 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| *Gap Certificate to be attached as per the period shown at 13.(b). | | | | | |
| 15. | Whether scholarship was availed under the Scheme or any other scheme in the previous year (2018-19) (If yes, then indicate the below details.) Certificate in Form 'B' is to be given. | | | | |
| | 1. Name of the Scholarship Scheme | | | | |
| | 2. Course of study for which scholarship was given | | | | |
| | 3. Name and address of the institution where student studied | | | | |

| | | |
|-----|--|--|
| 16. | Course of study for which scholarship is now desired | |
| | Name and Address of Institute | |
| | AISHE /UDISE Code of Instt. | |
| | Studying in I/II/III/IV year in the AY year 2019-20 | |
| | Date of joining of current session | |
| 17. | If residing in the hostel of the institution or a any hostel | |
| | Name and Address of Hostel | |
| | Date of joining Hostel in the Academic year 2019-20 | |
| 18. | Bank Details (photocopy of passbook to be enclosed) (Note : Bank Account to be compulsorily be seeded with Applicant's Aadhar Card) | |
| | Bank Name | |
| | Branch Name & IFSC Code | |
| | Account Number | |
| | Aadhar Card No. | |

19. Documents to be attached:

- I. Self Attested copy of Caste Tribe Certificate.
- II. Self Attested copy of Parents Domicile.
- III. Self Attested copy of Parents Income Certificate (2018-19).
- IV. Self Attested copy of Service certificate /Pay Slip (if parents are Govt. Employees)
- V. Self Attested copies of Marksheet.(XIIth std.,Previous two years 2017-18, 2018-19)
- VI. Original Fees Receipt (Academic Year 2019-20).
- VII. Attested copy of Fee Structure of College .
- VIII. Part 'B' of the application form duly completed and signed by the Head of Institution.
- IX. Self Attested copy of Aadhar Card
- X. Self Copy of first page of Bank Pass Book with IFSC Code. (Two Copy)(Adhar card seeded)

Name & Signature of Applicant

(ST)

Note:-Incomplete forms will be strictly rejected by Order.

DECLARATION

I hereby declare that I have read the regulations of the scheme and agree to abide by the terms and conditions of the award. I certify that the statements made in the application are correct and if any of the above information, is found incorrect by the authority of Scholarship, my application will stand rejected or I undertake to refund to the said authority the entire amount of scholarship through whichever means received by me or overpaid to me.

Date : _____

Place : _____

(b) Signature of Applicant

(b) Signature/ thumb impression of
the Father /Guardians

(b) Signature/ thumb impression of
the Mother /Guardians

PART - B
(To be filled in by the Head of Institution)

1. Duration of the Course in which applicant is studying.
2. Compulsory fees excluding hostel rent and other incidental charges to be paid by the applicant to the Institution for the current year from _____ to _____ as per details given below.

| Sr. No. | Particular of all non refundable compulsory fees payable by the applicant. | Amount actually paid by the applicant to the institution. | | | Remarks. |
|--------------|--|---|---------------|-----------|----------|
| | | 1 st Term Rs. | IInd Term Rs. | Total Rs. | |
| | Particulars | | | | |
| 1. | Tuition Fees. | | | | |
| 2. | Examination Fees. | | | | |
| 3. | Games. | | | | |
| 4. | Library. | | | | |
| 5. | Medical. | | | | |
| 6. | Identity Card. | | | | |
| 7. | Practical Fee. | | | | |
| 8. | Enrolment Fee. | | | | |
| 9. | Laboratory Fee. | | | | |
| 10. | Subject wise extra fees, if any, such as Home Science, Geography. | | | | |
| 11. | Any other fees compulsory payable (to be mentioned item wise with amount) | | | | |
| TOTAL | | | | | |

3. If the applicant is residing in hostel, indicate, if he/she is entitled to free board and lodging free board/free Lodging _____.

4. Certified that:-

- i. Information given by the applicant in part - A has been checked and found correct/ has been corrected in red ink.
- ii. The courses in which the applicant is studying in this institution is a post metric one.
- iii. This institution is affiliated to _____ University/Board and is recognized by the Government of India/State Gov. of _____ The applicant is studying in _____ course in the institution and the minimum qualification required for admission to that course is a pass in the _____ examination.

4. I undertake that the Scholarship amount in respect of the applicant is to be deposited in the account of the student for the specific purpose for which it is given and the information related to the applicant leaves the Institution or otherwise discontinues the studies or accepts any other regular scholarship / stipend, the fact will be immediately reported to the said authority and payment of Scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charges, fees etc. will also be refunded to the Government account.

Signature of the Head of the Institution

No. _____

Place _____

Date _____

Name in capital letters _____

Designation _____

Name & Address of Instt. _____

AISHE / UDISE Code _____

(Seal of the Institution)

ANNEXURE - I

**FORM OF DECLARATION OF INCOME
FORM (A)**

(To be given by the parents/guardians when the student is not employed)

Whereas my dependent son/daughter Shri/ Kum. / Smt. _____ Student of
_____ College has applied for grant of
scholarship. I, Shri _____ son
of Shri _____ address

_____ declare that my
total annual income from all sources in the preceding year ending 31st March 2019 is Rs. _____
as per details furnished below. I also affirm that particulars of property held by me are (as per
details furnished in the scheduled hereunder) and that I have correctly indicated the amount of
various taxes, ceses and land revenue paid by me. I made myself personally responsible for the
accuracy of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to
be false, I shall refund, to the President of India the whole amount of the scholarship paid to the said
_____ and the Government's decisions, whether the declaration of particular is
false-shall be final and binding on me.

Place _____

Date _____

(Signature)
Father/ Guardian

(Note :- Mostly the income declaration will be verified by a reference to official records. As for example in the
case of Government servants or those in private service, the reference to the Revenue Officer, in the case of
persons paying income tax, reference may be made to Income Tax authorities. In the case of shopkeepers,
reference may be made to sales tax figures, sales tax figures could in turn, assuming a normal profit of 10
percent to 15 % in case of retailers and 15 % to 20 % in the case of whole sale dealers for grains, etc. and houses,
annual rental value can be easily known by a reference to house tax which is fixed on the basis of rental value.
In the case of landless laborers , small holders, tenants of small size of lands held and extent of land cultivated
as owner/tenant or both and /or a reference to land revenue records.)

(ST)

प्रशासन
UT Administration of
संघशासितप्रदेशदादराएवंनगरहवेली
Dadra & Nagar Haveli
(शिक्षानिदेशालय)
(Directorate of Education)
सिलवासा - ३९६२३०
Silvassa - 396 230

Post Matric Scholarship for Schedule Caste for the Academic Year 2019-20 from the students belonging to Schedule Caste (Other than, Schedule Tribe, Other Backward Classes and Economically Backward Classes)

APPLICATION FORM FOR SCHOLARSHIPS

(To be submitted to Directorate of Education not later than **15/11/2019**).

**HISTORY SHEET OF APPLICATION FOR THE POST MATRIC
SCHOLARSHIPS TO SC STUDENTS**

Space for
Photograph

PART - A

(Instructions for the applicants)

1. The total income from all sources (father, mother/Husband/wife and any other sources) shall not exceed Rs.2.50 (Two Lakh Fifty Thousand) per annum.
2. The eligible students may download and print-out the form from the official website of the Administration of Dadra & Nagar Haveli www.dnh.nic.in and <http://rmsadnh.webs.com/> and submit their application by RPAD/Courier/by hand duly filled-up along with all the mandatory documents to the following address on or before 15/11/2019:-
3. The acknowledgment card is mandatory for any kind of scholarship support. All the candidates are required to carefully retain this acknowledgement with them.

PART-B

(To be filled in by the applicant)

| Sr. No | Particulars | | |
|--------|---|------------|---|
| 1. | Name in full as mentioned in Bank Passbook attached. (Block Letters only) | | |
| 2. | Father's Name | | |
| 3. | Mother's Name | | |
| 4. | Nationality | | INDIAN |
| 5. | Caste/Tribe | | |
| 6. | Whether married or single | | |
| 7. | If married Husband's | | |
| 8. | Full Address of the Applicant with Phone No. | | Mob.No:- |
| 9. | Annual Income Details:- (a+ b = c) | | (c) Total annual income for year ending 31 st March 2019 |
| | (a)Father/Husband | (b) Mother | |
| | | | |
| 10. | (a) Father's Occupation | | |
| | (b) Husband's | | |

| | | | | | |
|---|---|---------------------------|--|------------------------------------|---------|
| | (c) Mother's Occupation | | | | |
| 11. | (a) Name of the Guardian | | | | |
| | (b) Relation with the Applicant | | | | |
| | (c) Address of the Guardian | | | | |
| | (d) Occupation | | | | |
| | (e) Total annual income for the year ending 31 st March 2019 | | | | |
| 12. | (a) Particulars of examination taken starting with matriculation (please attach attested copies of certificates / marks sheet). | | | | |
| | Name of Examination | Year in which taken | Whether passed or not. In case of Last exam. Passed, indicate percentage of marks and Division | Institution and University / Board | Remarks |
| | 1 | 2 | 3 | 4 | 5 |
| | S.S.C. | | | | |
| | H.S.C. | | | | |
| | F.Y. () | | | | |
| | S.Y. () | | | | |
| | T.Y. () | | | | |
| | | | | | |
| | | | | | |
| | (b) Any break in educational career should be mentioned indicating what he /she were doing during this period). | | | | |
| | Name of Examination last appeared before break | Year in which break taken | | Activity during gap period | Remarks |
| | | From | To | | |
| | 1 | 2 | 3 | 4 | 5 |
| | | | | | |
| | | | | | |
| *Gap Certificate to be attached as per the period shown at 12.(b) | | | | | |
| 13. | Whether scholarship was availed under the Scheme or any other scheme in the previous year (If yes, then indicate the below details.) Certificate in Form 'B' is to be given. | | | | |
| | Name of the Scholarship Scheme | | | | |
| | Course of study for which scholarship was given | | | | |
| | Name of the institution where student studied | | | | |
| 14. | 4. Course of study for which scholarship is now desired | | | | |
| | 5. Name and address of Institutes. | | | | |
| | 6. AISHE Code of Institute. | | | | |
| | 7. Studying in I/II/III/IV/V - (Name of Course) in the AY year 2019-20 | | | | |
| | 8. Date of joining of current session | | | | |

| | | |
|-----|---|--|
| 15. | If residing in the hostel of the institution or a hostel | |
| | Name and Address of Hostel | |
| | Date of joining Hostel in the year 2019-20 | |
| 16. | Bank Details (copy to be enclosed) (Note : Bank Account to be compulsorily be seeded with Applicant's Aadhar Card) | |
| | Bank Name | |
| | Bank IFSC Code | |
| | Account Number | |
| | Aadhar Card No. | |

17. Documents to be attached:

- I. Self-attested Copy of Cast Certificate.
- II. Self-attested Copy of Parents/Self Domicile.
- III. Self-attested copy of Parents Income Certificate (2018-19).
- IV. Self-attested copy of Service certificate /Pay Slip (if parents are Govt. Employees)
- V. Self-attested Copies of Previous two years Mark sheets (2017-18 & 2018-19).
- VI. Original Fees Receipt (Academic Year 2019-20).
- VII. Attested Copy of Fee Structure of College.
- VIII. Self-attested copy of Aadhar Card.
- IX. Part 'C' of the application form duly completed and signed by the Head of Institution.
- X. Copy of Aadhar Number seeded (2 Photo copy) of bank's Pass Book with IFSC Code.

Signature of Applicant

Note: -

➤ **Incomplete forms will be strictly rejected by Order.**

DECLARATION

I hereby declare that I have read the regulations of the scheme as well as the instructions stated in Part A of this application form and agree to abide by the terms and conditions of the award. I certify that the statements made in the application are correct and if any of the above information, is found incorrect by the authority of Scholarship, my application will stand rejected or I undertake to refund to the said authority the entire amount of scholarship through whichever means received by me or overpaid to me.

Date : _____

Place : _____

(a) Signature of Applicant

(b) Signature left/right hand thumb
impression of the Father /Guardians

(c) Signature left/right hand thumb
impression of the Mother /Guardians

PART - C
(To be filled in by the Head of Institution)

1. Duration of the Course in which applicant is studying.
2. Compulsory fees excluding hostel rent and other incidental charges to be paid by the applicant to the Institution for the current year from _____ to _____ as per details given below.

| Sr. No. | Particular of all non refundable compulsory fees payable by the applicant. | Amount actually paid by the applicant to the institution. | | | Remarks. |
|--------------|--|---|---------------|-----------|----------|
| | | 1 st Term Rs. | IInd Term Rs. | Total Rs. | |
| | Particulars | | | | |
| 1. | Tuition Fees. | | | | |
| 2. | Examination Fees. | | | | |
| 3. | Games. | | | | |
| 4. | Library. | | | | |
| 5. | Medical. | | | | |
| 6. | Identity Card. | | | | |
| 7. | Practical Fee. | | | | |
| 8. | Enrolment Fee. | | | | |
| 9. | Laboratory Fee. | | | | |
| 10. | Subject wise extra fees, if any, such as Home Science, Geography. | | | | |
| 11. | Any other fees compulsory payable (to be mentioned item wise with amount) | | | | |
| TOTAL | | | | | |

5. If the applicant is residing in hostel, indicate; if he/she is entitled to free board and lodging free board/free Lodging._____.

4. Certified that:-

- iv. Information given by the applicant in part - A has been checked and found correct/has been corrected in red ink.
- v. The courses in which the applicant is studying in this institution is a post metric one.
- vi. This institution is affiliated to _____ University/Board and is recognized by the Government of India/State Gov. of _____ The applicant is studying in _____ course in the institution and the minimum qualification required for admission to that course is a pass in the _____ examination.

5.I undertake that the Scholarship amount in respect of the applicant is to be deposited in the account of the student for the specific purpose for which it is given and the information related to the applicant leaves the Institution or otherwise discontinues the studies or accepts any other regular scholarship / stipend, the fact will be immediately reported to the said authority and payment of Scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charges, fees etc. will also be refunded to the Government account.

Signature of the Head of the Institution

No. _____

Place _____

Date _____

Name in capital letters _____

Designation _____

Address _____

AISHE/UDISE Code _____

(Seal of the Institution)

ANNEXURE - I

**FORM OF DECLARATION OF INCOME
FORM (A)**

(To be given by the parents/guardians when the student is not employed)

Whereas my dependent son/daughter Shri/ Kum. / Smt. _____ Student of
_____ College has applied for grant of
scholarship. I, Shri _____ son
of Shri _____ address

_____ declare that my
total annual income from all sources in the preceding year ending 31st March 2019 is Rs. _____
as per details furnished below. I also affirm that particulars of property held by me are (as per
details furnished in the scheduled hereunder) and that I have correctly indicated the amount of
various taxes, ceses and land revenue paid by me. I made myself personally responsible for the
accuracy of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to
be false, I shall refund, to the President of India the whole amount of the scholarship paid to the said
_____ and the Government's decisions, whether the declaration of particular is
false-shall be final and binding on me.

Place _____

Date _____

(Signature)
Father/ Guardian

(Note :- Mostly the income declaration will be verified by a reference to official records. As for example in the
case of Government servants or those in private service, the reference to the Revenue Officer, in the case of
persons paying income tax, reference may be made to Income Tax authorities. In the case of shopkeepers,
reference may be made to sales tax figures, sales tax figures could in turn, assuming a normal profit of 10
percent to 15 % in case of retailers and 15 % to 20 % in the case of whole sale dealers for grains, etc. and houses,
annual rental value can be easily known by a reference to house tax which is fixed on the basis of rental value.
In the case of landless laborers , small holders, tenants of small size of lands held and extent of land cultivated
as owner/tenant or both and /or a reference to land revenue records.)

प्रशासन
UT Administration of
संघशासितप्रदेशदादराएवंनगरहवेली
Dadra & Nagar Haveli
(शिक्षानिदेशालय)
(Directorate of Education)
सिलवासा - ३९६२३०
Silvassa - 396 230



Post Matric Scholarship for Other Backward Classes for the Academic Year 2019-20 from the students belonging to Other Backward Classes (Other than Schedule Caste, Schedule Tribe and Economically Backward Classes)

APPLICATION FORM FOR SCHOLARSHIPS

(To be submitted to Directorate of Education not later than 15/11/2019).

**HISTORY SHEET OF APPLICATION FOR THE POST MATRIC
SCHOLARSHIPS TO OBC STUDENTS**

Space for
Photograph

PART - A

(Instructions for the applicants)

1. The total income from all sources (father, mother/Husband/wife and any other sources) shall not exceed Rs.1.50 (One lakh Fifty Thousand) per annum.
2. The eligible students may download and print-out the form from the official website of the Administration of Dadra & Nagar Haveli www.dnh.nic.in and <http://rmsadnh.webs.com/> and submit their application by RPAD/Courier/by hand duly filled-up along with all the mandatory documents to the following address on or before 15/11/2019:-
3. The acknowledgment card is mandatory for any kind of scholarship support. All the candidates are required to carefully retain this acknowledgement with them.

PART-B

(To be filled in by the applicant)

| Sr. No | Particulars | |
|--------|---|---|
| 1. | Name in full as mentioned in Bank Passbook attached. (Block Letters only) | |
| 2. | Father's Name | |
| 3. | Mother's Name | |
| 3. | Nationality | INDIAN |
| 4. | Caste/Tribe | |
| 5. | Whether married or single | |
| 6. | Full Address of the Applicant with Phone No. | |
| | Mob.No:- | |
| 7. | Annual Income Details:- (a+ b= c) | (c) Total annual income for year ending 31 st March 2019 |
| | (a) Father/Husband | |
| | | |
| 8. | (a) Father's Occupation | |

| | | | | | |
|-----|---|---------------------------|--|------------------------------------|---------|
| | (b) Husband's Occupation | | | | |
| | (c) Mother's Occupation | | | | |
| 9. | (f) Name of the Guardian | | | | |
| | (g) Relation with the Applicant | | | | |
| | (h) Address of the Guardian | | | | |
| | (i) Occupation | | | | |
| | (j) Total annual income for the year ending 31 st March 2018 | | | | |
| 10. | Particulars of examination taken starting with matriculation (please attach attested copies of certificates / marks sheet). | | | | |
| (a) | | | | | |
| | Name of Examination | Year in which taken | Whether passed or not. In case of Last exam. Passed, indicate percentage of marks and Division | Institution and University / Board | Remarks |
| | 1 | 2 | 3 | 4 | 5 |
| | S.S.C. | | | | |
| | H.S.C. | | | | |
| | F.Y. () | | | | |
| | S.Y. () | | | | |
| | T.Y () | | | | |
| | | | | | |
| | | | | | |
| (b) | Any break in educational career should be mentioned indicating what he /she were doing during this period). | | | | |
| | Name of Examination last appeared before break | Year in which break taken | | Activity during gap period | Remarks |
| | | From | To | | |
| | 1 | 2 | 3 | 4 | 5 |
| | | | | | |
| | | | | | |
| | | | | | |
| | *Gap Certificate to be attached as per the period shown at 10.(b). | | | | |
| 11. | Whether scholarship was availed under the Scheme or any other scheme in the previous year (If yes, then indicate the below details.) Certificate in Form 'B' is to be given. | | | | |
| | Name of the Scholarship Scheme | | | | |
| | Course of study for which scholarship was given | | | | |
| | Name of the institution where student studied | | | | |
| 12. | 9. Course of study for which scholarship is now desired | | | | |
| | 10. Studying in I/II/III/IV/V - (Name of Course) in the AY year 2018-19 | | | | |
| | 11. AISHE Code of Institute | | | | |
| | 12. Date of joining of current session | | | | |

| | | |
|-----|---|--|
| 13. | If residing in the hostel of the institution or a hostel | |
| | Name and Address of Hostel | |
| | Date of joining Hostel in the year 2018-19 | |
| 14. | Bank Details (copy to be enclosed) (Note : Bank Account to be compulsorily be seeded with Applicant's Aadhar Card) | |
| | Bank Name | |
| | Bank IFSC Code | |
| | Account Number | |
| | Aadhar Card No. | |

17. Documents to be attached:

- I. Self attested Copy of Cast Certificate issued by Mamlatdar (Silvassa/Khanvel), DNH.
- II. Self attested Copy of Parents/Self Domicile.
- III. Self-attested copy of Parents Income Certificate (2018-19).
- IV. Self-attested copy of Service certificate /Pay Slip (if parents are Govt. Employees)
- V. Self-attested Copies of Previous two years Mark sheets (2017-18, 2018-19)and XII Std Marksheet.
- VI. Original Fees Receipt.(2019-20).
- VII. Attested Copy of Fee Structure of College.
- VIII. Part 'C' of the application form duly completed and signed by the Head of Institution.
- IX. Self attested copy of Aadhar Card.
- X. Copy of Aadhar Number seeded (2 Photo copy) of bank's Pass Book with IFSC Code.

Signature of Applicant

Note: -

➤ **Incomplete forms will be strictly rejected by Order.**

DECLARATION

I hereby declare that I have read the regulations of the scheme as well as the instructions stated in Part A of this application form and agree to abide by the terms and conditions of the award. I certify that the statements made in the application are correct and if any of the above information, is found incorrect by the authority of Scholarship, my application will stand rejected or I undertake to refund to the said authority the entire amount of scholarship through whichever means received by me or overpaid to me.

Date : _____

Place : _____

(a) Signature of Applicant

(b) Signature left/right hand thumb
impression of the Father /Guardians

(c) Signature left/right hand thumb
impression of the Mother /Guardians

PART - C
(To be filled in by the Head of Institution)

1. Duration of the Course in which applicant is studying.
2. Compulsory fees excluding hostel rent and other incidental charges to be paid by the applicant to the Institution for the current year from _____ to _____ as per details given below.

| Sr. No. | Particular of all non refundable compulsory fees payable by the applicant. | Amount actually paid by the applicant to the institution. | | | Remarks. |
|--------------|--|---|---------------|-----------|----------|
| | | 1 st Term Rs. | IInd Term Rs. | Total Rs. | |
| | Particulars | | | | |
| 1. | Tuition Fees. | | | | |
| 2. | Examination Fees. | | | | |
| 3. | Games. | | | | |
| 4. | Library. | | | | |
| 5. | Medical. | | | | |
| 6. | Identity Card. | | | | |
| 7. | Practical Fee. | | | | |
| 8. | Enrolment Fee. | | | | |
| 9. | Laboratory Fee. | | | | |
| 10. | Subject wise extra fees, if any, such as Home Science, Geography. | | | | |
| 11. | Any other fees compulsory payable (to be mentioned item wise with amount) | | | | |
| TOTAL | | | | | |

4. If the applicant is residing in hostel, indicate, if he/she is entitled to free board and lodging free board/free Lodging._____.
5. Certified that:-
 - I. Information given by the applicant in part - A has been checked and found correct/has been corrected in red ink.
 - II. The courses in which the applicant is studying in this institution is a post metric one.
 - III. This institution is affiliated to _____ University/Board and is recognized by the Government of India/State Gov. of _____ The applicant is studying in _____ course in the institution and the minimum qualification required for admission to that course is a pass in the _____ examination.

5.I undertake that the Scholarship amount in respect of the applicant is to be deposited in the account of the student for the specific purpose for which it is given and the information related to the applicant leaves the Institution or otherwise discontinues the studies or accepts any other regular scholarship / stipend, the fact will be immediately reported to the said authority and payment of Scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charges, fees etc. will also be refunded to the Government account.

Signature of the Head of the Institution

No. _____

Place _____

Date _____

Name in capital letters _____

Designation _____

Address _____

AISHE/UDISE Code _____

(Seal of the Institution)

ANNEXURE - I

**FORM OF DECLARATION OF INCOME
FORM (A)**

(To be given by the parents/guardians when the student is not employed)

Whereas my dependent son/daughter Shri/ Kum. / Smt. _____ Student of
_____ College has applied for grant of
scholarship. I, Shri _____ son
of Shri _____ address

_____ declare that my
total annual income from all sources in the preceding year ending 31st March 2019 is Rs. _____
as per details furnished below. I also affirm that particulars of property held by me are (as per
details furnished in the scheduled hereunder) and that I have correctly indicated the amount of
various taxes, ceses and land revenue paid by me. I made myself personally responsible for the
accuracy of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to
be false, I shall refund, to the President of India the whole amount of the scholarship paid to the said
_____ and the Government's decisions, whether the declaration of particular is
false-shall be final and binding on me.

Place _____

Date _____

(Signature)
Father/ Guardian

(Note :- Mostly the income declaration will be verified by a reference to official records. As for example in the
case of Government servants or those in private service, the reference to the Revenue Officer, in the case of
persons paying income tax, reference may be made to Income Tax authorities. In the case of shopkeepers,
reference may be made to sales tax figures, sales tax figures could in turn, assuming a normal profit of 10
percent to 15 % in case of retailers and 15 % to 20 % in the case of whole sale dealers for grains, etc. and houses,
annual rental value can be easily known by a reference to house tax which is fixed on the basis of rental value.
In the case of landless laborers , small holders, tenants of small size of lands held and extent of land cultivated
as owner/tenant or both and /or a reference to land revenue records.)

प्रशासन
UT Administration of
संघ शासित प्रदेश दादरा एवं नगर हवेली
Dadra & Nagar Haveli
(शिक्षा निदेशालय)
(Directorate of Education)
सिलवासा - ३९६२३०
Silvassa - 396 230



Post Matric Scholarship for Economically Backward Classes for the Academic Year 2019-20 from the students belonging to General Category (Other than Schedule Caste, Schedule Tribe and Other Backward Classes)

APPLICATION FORM FOR SCHOLARSHIPS

(To be submitted to Directorate of Education not later than 15/11/2019).

**HISTORY SHEET OF APPLICATION FOR THE POST MATRIC
SCHOLARSHIPS TO EBC STUDENTS**

Space for
Photograph

PART - A

(Instructions for the applicants)

1. The total income from all sources (father, mother/Husband/wife and any other sources) shall not exceed Rs.1.00 (One) lakh per annum.
2. Scholarship will be given only to those who are pursuing their education in the Government Institutions only.
3. The eligible students may download and print-out the form from the official website of the Administration of Dadra & Nagar Haveli www.dnh.nic.in and <http://rmsadnh.webs.com/> and submit their application by RPAD/Courier/by hand duly filled-up along with all the mandatory documents to the following address on or before 15/11/2019:-
4. The acknowledgment card is mandatory for any kind of scholarship support. All the candidates are required to carefully retain this acknowledgement with them.

PART-B

(To be filled in by the applicant)

| Sr. No | Particulars | | |
|--------|---|------------|---|
| 1. | Name in full as mentioned in Bank Passbook attached. (Block Letters only) | | |
| 2. | Father's Name | | |
| 3. | Mother's Name | | |
| 4. | Nationality | | INDIAN |
| 5. | Caste/Tribe | | |
| 6. | Full Address of the Applicant with Phone No. | | |
| | | | Mob. No:- |
| 7. | Annual Income Details:- (a+ b= e) | | (c) Total annual income for year ending 31 st March 2018 |
| | (a)Father/Husband | (b) Mother | |
| | | | |
| 8. | (a)Father's Occupation | | |
| | (b)Husband's | | |

| | | | | | | |
|--|---|--|--|------------------------------------|----------------------------|---------|
| | (c)Mother's Occupation | | | | | |
| 9. | Name of the Guardian | | | | | |
| | Relation with the Applicant | | | | | |
| | Address of the Guardian | | | | | |
| | Occupation | | | | | |
| | Total annual income for the year ending 31 st March 2018 | | | | | |
| 10. (a) | Particulars of examination taken starting with matriculation (please attach attested copies of certificates / marks sheet). | | | | | |
| | Name of Examination | Year in which taken | Whether passed or not. In case of Last exam. Passed, indicate percentage of marks and Division | Institution and University / Board | Remarks | |
| | 1 | 2 | 3 | 4 | 5 | |
| | Matriculation | | | | | |
| | S.S.C. | | | | | |
| | H.S.C. | | | | | |
| | F.Y. () | | | | | |
| | S.Y. () | | | | | |
| | T.Y () | | | | | |
| | | | | | | |
| | | | | | | |
| | (b) | Any break in educational career should be mentioned indicating what he /she were doing during this period). | | | | |
| | | Name of Examination last appeared before break | Year in which break taken | | Activity during gap period | Remarks |
| | | | From | To | | |
| | | 1 | 2 | 3 | 4 | 5 |
| | | | | | | |
| | | | | | | |
| *Gap Certificate to be attached as per the period shown at 10.(b). | | | | | | |
| 11. | Whether scholarship was availed under the Scheme or any other scheme in the previous year (If yes, then indicate the below details.) Certificate in Form 'B' is to be given. | | | | | |
| | Name of the Scholarship Scheme | | | | | |
| | Course of study for which scholarship was given | | | | | |
| | Name of the institution where student studied | | | | | |
| 12. | 13. Course of study for which scholarship is now desired | | | | | |
| | 14. Name and address if Institute | | | | | |
| | 15. AISHE Code of Institute. | | | | | |
| | 16. Studying in I/II/III/IV/V - (Name of Course) in the AY year 2018-19 | | | | | |
| | 17. Date of joining of current session | | | | | |

| | | |
|-----|---|--|
| 15. | If residing in the hostel of the institution or a hostel | |
| | Name and Address of Hostel | |
| | Date of joining Hostel in the year 2018-19 | |
| 16. | Bank Details (copy to be enclosed) (Note : Bank Account to be compulsorily be seeded with Applicant's Aadhar Card) | |
| | Bank Name | |
| | Bank IFSC Code | |
| | Account Number | |
| | Aadhar Card No. | |

17. Documents to be attached:

- I. Self attested Copy of Parents/Self Domicile.
- II. Self-attested copy of Parents Income Certificate.
- III. Self-attested copy of Service certificate /Pay Slip (if parents are Govt. Employees)
- IV. Self-attested Copies of Previous two years Mark sheet (2017-18, 2018-19).
- V. Original Fees Receipt.(2019-20)
- VI. Copy of Fee Structure of College
- VII. Part 'B' of the application form duly completed and signed by the Head of Institution.
- VIII. Self attested copy of Aadhar Card.
- IX. Copy of Aadhar Number seeded (2 Photo copy) of bank's Pass Book with IFSC Code.

Name & Signature of Applicant

Note: -

➤ **Incomplete forms will be strictly rejected by Order.**

DECLARATION

I hereby declare that I have read the regulations of the scheme as well as the instructions stated in Part A of this application form and agree to abide by the terms and conditions of the award. I certify that the statements made in the application are correct and if any of the above information, is found incorrect by the authority of Scholarship, my application will stand rejected or I undertake to refund to the said authority the entire amount of scholarship through whichever means received by me or overpaid to me.

Date : _____

Place : _____

(a) Signature of Applicant

(b) Signature left/right hand thumb
impression of the Father /Guardians

(c) Signature left/right hand thumb
impression of the Mother /Guardians

PART - C

(To be filled in by the Head of Institution)

1. Duration of the Course in which applicant is studying.
2. Compulsory fees excluding hostel rent and other incidental charges to be paid by the applicant to the Institution for the current year from _____ to _____ as per details given below.

| Sr. No. | Particular of all non refundable compulsory fees payable by the applicant. | Amount actually paid by the applicant to the institution. | | | Remarks. |
|--------------|--|---|---------------------------|-----------|----------|
| | | 1 st Term Rs. | II nd Term Rs. | Total Rs. | |
| | Particulars | | | | |
| 1. | Tuition Fees. | | | | |
| 2. | Examination Fees. | | | | |
| 3. | Games. | | | | |
| 4. | Library. | | | | |
| 5. | Medical. | | | | |
| 6. | Identity Card. | | | | |
| 7. | Practical Fee. | | | | |
| 8. | Enrolment Fee. | | | | |
| 9. | Laboratory Fee. | | | | |
| 10. | Subject wise extra fees, if any, such as Home Science, Geography. | | | | |
| 11. | Any other fees compulsory payable (to be mentioned item wise with amount) | | | | |
| TOTAL | | | | | |

5. If the applicant is residing in hostel, indicate, if he/she is entitled to free board and lodging free board/free Lodging._____.

4. Certified that:-

- I. Information given by the applicant in part - A has been checked and found correct/ has been corrected in red ink.
- II. The courses in which the applicant is studying in this institution is a post metric one.
- III. This institution is affiliated to _____ University/Board and is recognized by the Government of India/State Gov. of _____ The applicant is studying in _____ course in the institution and the minimum qualification required for admission to that course is a pass in the _____ examination.

5. I undertake that the Scholarship amount in respect of the applicant is to be deposited in the account of the student for the specific purpose for which it is given and the information related to the applicant leaves the Institution or otherwise discontinues the studies or accepts any other regular scholarship / stipend, the fact will be immediately reported to the said authority and payment of Scholarship to the applicant will also be discontinued. The undisbursed amount lying with the Institution on account of maintenance charges, fees etc. will also be refunded to the Government account.

Signature of the Head of the Institution

No. _____

Place _____

Date _____

Name in capital letters _____

Designation _____

Address _____

AISHE/UDISE Code _____

(Seal of the Institute and College)

ANNEXURE - I

**FORM OF DECLARATION OF INCOME
FORM (A)**

(To be given by the parents/guardians when the student is not employed)

Whereas my dependent son/daughter Shri/ Kum. / Smt. _____ Student
of _____ College has applied for grant of
scholarship. I, Shri _____ son
of Shri _____ address

_____ declare that my
total annual income from all sources in the preceding year ending 31st March _____ is
Rs. _____ as per details furnished below. I also affirm that particulars of property held by me
are (as per details furnished in the scheduled hereunder) and that I have correctly indicated the
amount of various taxes, cess and land revenue paid by me. I made myself personally responsible for
the accuracy of the facts and figures furnished.

I further undertake that in the event of the particulars given in this declaration being found to
be false, I shall refund, to the President of India the whole amount of the scholarship paid to the said
_____ and the Government's decisions, whether the declaration of particular is
false-shall be final and binding on me.

Place _____

Date _____

(Signature)
Father / Guardian

(Note :- Mostly the income declaration will be verified by a reference to official records. As for example in the
case of Government servants or those in private service, the reference to the Revenue Officer, in the case of
persons paying income tax, reference may be made to Income Tax authorities. In the case of shopkeepers,
reference may be made to sales tax figures, sales tax figures could in turn, assuming a normal profit of 10
percent to 15 % in case of retailers and 15 % to 20 % in the case of whole sale dealers for grains, etc. and houses,
annual rental value can be easily known by a reference to house tax which is fixed on the basis of rental value.
In the case of landless laborers , small holders, tenants of small size of lands held and extent of land cultivated
as owner/tenant or both and /or a reference to land revenue records.)

प्रशासन
UT Administration of
संघ शासित प्रदेश दादरा एवं नगर हवेली
Dadra and Nagar haveli
(शिक्षा निदेशालय)
(Directorate of Education)
सिलवासा -३९६२३०
Silvassa - 396230

F. No. DOE/GNL/PMS/ST/2019-20/8376

DATE-14/10/2019

To,

The Asstt. Director,
Department of Information and Technology,
Dadra and Nagar Haveli,
Silvassa

Sub: Publishing of Notice Inviting Application - reg.

Sir,

Please find enclosed herewith the Notice Inviting Applications along with the form Post Matric Scholarship for the Academic Year 2019-20 in respect of the students belonging to the Scheduled Tribe (ST), Scheduled Caste (SC), Other Backward Class (OBC) and Economically Backward Class (EBC) families of the UT of Dadra & Nagar Haveli.

Please publish the notice on the official website of the UT Administration of Dadra & Nagar Haveli for wide publicity.

Yours faithfully

Sd-
Asstt. Director of Education/
Nodal Officer(Sch.)
Directorate of Education
email – doe-dnh@nic.in
Ph. No. 0260-2642098

Encl: As above