Mahatma Gandhi University DEPARTMENT OF STUDENT SERVICES

Application for Merit Scholarship (Transgender students)

Date: CERTIFICATE BY THE PRINCIPAL Certified that Sri/Kum is/was a bonafide full time student of this college studying in (class & course) during the academic year and that the facts given by the student in this application is verified and found correct. Place:				
2 College/Department /Institution 3 Course and academic year of study (Attach mark list of last attended examination) 4 Name of Father/Mother/Guardian & Mobile No. 5 Annual Income of family (In Rupees) 6 Home Address 7 Medical Details 8 Details of Scholarship/Grant/Aid if any received from Mahatma Gandhi University CERTIFICATE Certified that the above mentioned information is correct and true to the best of my knowledge. Signature of the Father/Mother/Guardian Date: Date: CERTIFICATE BY THE PRINCIPAL Certified that Sri/Kum is/was a bonafide full time student of this college studying in (class & course) durit the academic year	1	Name of student in block	letters	
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Certified that Sri/Kum is/was a bonafide full time student of this college studying in	Signature of the Father/Mother/Guardian			Signature of the Applicant
is/was a bonafide full time student of this college studying in		<u>CE</u>	ERTIFICATE BY	THE PRINCIPAL
the academic year		Certified that Sri/Kum		
the academic year	is/was	a bonafide full time studen	t of this college stu	dying in
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For DSS Office Use only		(College Seal)	Signature of the Principal
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Date: (Office Seal) DIRECTOR OF STUDENT SERVICES			Office Seal)	DIRECTOR OF STUDENT SERVICES