<u>APPLICATION FOR AWARD OF "PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE" – RENEWAL</u>

ANNEXURE - III

ANNUAL PROGRESS REPORT FOR 200____-200____ [Rule VII(5)]

PE	RUNTHALAIVAR KAMARAJAR FINANCIAL AS STUDYING		TO THE STUDENTS COURSE
1.	Name of the student (in BLOCK LETTERS)	:	
2.	Institution	:	
3.	CENTAC No. & year of admission	:	
4.	Students Bank A/c Details (a) Name of the Bank & Branch	:	
	(b) Bank Account No. (Attested copy of the 1 st Page of Bank Pass Book (or) Statement of A/c should be enclosed)	:	
5.	Last Year Sanction Order No. & Date	:	
ŝ.	Number and Date of Cheque	:	
7.	Course of Present Study	:	
3.	Whether promoted to next higher class?	:	
9.	The date on which he/she joined the class in the current academic year	:	
10.	The month in which his/her University Examination of the current academic year will ordinarily be over	:	
11.	(a) Details of marks obtained in the Non-semester/ Semester Examination(b) Total Number of maximum marks	:	
	(c) Marks obtained by the Scholar (Both semester)	:	
	(d) Percentage of marks obtained by the Scholar (Aggregate of both semesters	:	
12.	Character and conduct of the student	:	
13.	Specific recommendation of the Principal / Head of the Institution	:	

Signature of the Head of Institution

Place:

Date:

ANNEXURE - II

INCOME AFFIDAVIT

[Rule VII(3)]

DECLARATION OF INCOME FOR THE YEAR 200 - 200 (ENDING 31ST MARCH OF A YEAR) FOR PURPOSE OF FINANCIAL ASSISTANCE UNDER THE SCHEME PERUNTHALAIVAR KAMARAJAR FINANCIAL ASSISTANCE TO THE STUDENTS STUDYING

^	ASSISTANCE ONDER THE SCHEME PERONTH ASSISTANCE TO THE STUDE	
	l,	(Name of Father / Mother) Son /
Daug	nter of Thiru.Tmt	at present residing
at		
solem	nly affirm and says as follows:-	
	1. That my Son/Daughter Thiru/Selvi the student) who is applying for the grant of Perunthalaivar Finance Assistance to the stude course is studying in	ents studying
	2. That my annual income in the prece Rs	le hereunder written. I also affirm that in the Schedule and that I have correctly and land revenue paid by me. I make
	3. That the statements made in the foregoi	ng paragraphs are true to my knowledge.
	4. That I further undertake that in the Declaration being found to be false, I shall redouble the amount of the Financial Assistan Government's decision on whether the Declarand binding on me.	nce paid to the said Awardee and the
	SCHEDULE	
		Signature
Signa	ture of Executive Magistrate	Name in full :
/ T		

(To be signed in the presence of Executive Magistrate who affixes his seal and signature)

SCHEDULE

(All the columns in the Schedule should be filled in properly by Words and not by Dashes or Dots)

l.	Exter	nt of land held and income –			
	(a) In	(a) Independently as owner -			
	i)	Area	:		
	ii)	Village	:		
	iii)	Survey No.	:		
	iv)	Land Revenue Assessment	:		
	v)	Annual Income	: Rs.		
	(b) Jo	pintly as owner -			
	i)	Area	:		
	ii)	Village	:		
	iii)	Survey No.	:		
	iv)	Land Revenue Assessment	:		
	v)	Annual Income	:Rs.		
	(c) In	dependently as tenant -			
	i)	Area	:		
	ii)	Village	:		
	iii)	Survey No.	:		
	iv)	Land Revenue Assessment	:		
	v)	Annual Income	:Rs.		
	(d) Jo	pintly as tenant -			
	i)	Area	:		
	ii)	Village	:		
	iii)	Survey No.	:		
	iv)	Land Revenue Assessment	:		
	v)	Annual Income of the Scholars Father /	:Rs.		
		Father			

II.	buildings, house-sites, etc.) i) House No.	:
	ii) Street / Road	:
	iii) Village / Town / City	:
	iv) Area of Site	:
	v) Rent derived, if any	:
	vi) House Tax Paid	:
	vii) Sanitary cess or other house taxes paid	:
	viii) Net Annual Income after deduction of	:
	items (vi) and (vii)	
III.	Income from shops	
	i) Address of Shop	:
	ii) Nature of trade	:
	iii) Sales / Tax Income Tax Paid	:
	iv) Licence No.	:
	v) Rent derived, if any	:
	vi) Annual Income	: Rs.
IV.	Salaries drawn	
	i) Name of the employer	:
	ii) Office / Unit in which he is working and	:
	designation	:
	iii) Address of Office	:
	iv) Annual emoluments for 200 200	:
	Break up for annual emoluments - Basic Pay	: Rs.
	D.A. / A.D.A.	: Rs.
	H.R.A. etc.	: Rs.
	O.T.A. / Bonus	: Rs.
	Others	: Rs.
	Total	: Rs.
(Anne	exure has to be attached from the Pay	

Drawing Officer in respect of salaried person)
V. Other Source of Income

i) Income from subsidiary industries / Part : Rs.

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ii) Amount drawn as wages : Rs.iii) Any other income : Rs.

VI. Annual Income of wife and the scholar from any : source

VII. Total income of the family for the whole year : Rs.

200___- 200____

Average Income of the family for one month : Rs.

Signature of the Parent of Scholar

Note:

- (1) Total Income of the family should include income of father, mother and the scholars and of no other members though they may be earning.
- (2) If father is dead then mother's income will be shown alongwith the income, if any in the scholar's own name from shares, property, etc.
- (3) If both father and mother of the scholar are deceased, then the income, if any, in the scholar's name only will be shown and not he income of any guardian who may be supporting the scholar.
- (4) A detailed break-up from the annual emolument shown under Column No.IV (Salaries drawn) as required against the column should invariably be furnished.

CERTIFICATE

(In case where the marks are indicated by Grades or Grade Point Average this Certificate furnished in addition to the attested copies of the marks lists)

Certified that	at Thiru / Selvi		d	oing
	in		(Name of	the
College) has sec	ured not less than 50	% of marks in the aggregate	e of I and II Seme	ster
Examinations / I, I	I and III Trimester Ex	amination / in the University	examination during	the
Academic Year.				
Place:				
Date :		Signature of the Hea	d of Institution	

CERTIFICATE

(In case the student was absent on Medical Grounds from University Examination)			
Certified that Thiru/Selvi	did not appear for the		
following examination(s) during the course of the acader	mic year on		
valid medical grounds. The Medical Certificate is enclosed.			
EXAMINATION	DATE(S)		
(i) I or II Semester :			
(ii) I or II or III Trimester :			
(iii) University Examination :			
Certified further that I am satisfied from the general academic performance of the student that had he/she appeared for (each of) the above – mentioned examination(s), he / she would have secured not less than 50% of the total marks in the aggregate.			
Place:			
Date: Signatu	re of the Head of Institution		
NOTE:			
Please note that if the particulars are not corre	ectly furnished, the Annual Progress		

- Report will be rejected.
- 2. The Annual Progress Report of each Scholar along with a fresh Income Affidavit should be forwarded to the Director of Higher & Technical Education, Puducherry within one month from the date of publication of results.

SELF AFFIDAVIT

(To be furnished in Stamped Paper worth Rs.5/-)		
I,		
	I time to the course of study for which I have	
Further I undertake in the event of particulars given in this Declaration being found to be false or become ineligible for receipt of the Financial Assistance I shall refund the double the amount of the Financial Assistance received by me to the Government of Puducherry.		
	Signature of the Student	
Date:	Name	
	Address	
Withess 1.	Name	
	Address	
Withess 2.	Name	
	Address	

CHECK LIST (RENEWAL)

1. Name of the student :

2. Name of the Institution :

3. Year of Admission :

4. Course of Present Study :

5. Category : SC / ST / OBC / MBC / General

6. Detail of Financial Assistance Already availed

F.A. Availed Amount Sanction Order No. & Date Cheque No. & Date

I Year

II Year

III Year

(FOR DIRECTORATE OF HIGHER & TECHNICAL EDUCATION OFFICE USE ONLY)

7. Copy of CENTAC Selection Order : Enclosed / Not Enclosed

8. Self Affidavit : Enclosed / Not Enclosed

9. Income Affidavit : Enclosed / Not Enclosed

10. Income Limit : Below Rs.3 Lakhs / Rs.3 to 5 Lakhs

11. Caste Certificate (In case of SC / ST / OBC / MBC) : Enclosed / Not Enclosed

12. Attested copies of Mark List for previous year : Enclosed / Not Enclosed

Examination

13. Application duly filled in : Yes / No

14. Attested copy of 1st Page of Bank Pass Book / : Enclosed / Not Enclosed Account Statement

SIGNATURE OF DEALING ASSISTANT

SECTION HEAD