SOUTHERN RAILWAY

ASSISTANCE FROM STAFF BENIFIT FUND

Application for fresh/Renewal of Scholarship for Higher Technical /Professional Education (DEGREE COURSES) For Wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each child)
(Maximum 2 children at a time only)

Affix Latest passport size photograph of the ward (Photo to be attested by Institution/College Authority)

1	Name of the Employee						
2	Designation/Office/Division/Unit	:	A				
3(a)	PF Number	:					
(b)	Staff/Ticket No.	:					
4	Bill Unit No.	1:					
5	Station/Bill preparing Office				gogi andreks aktivas zy wyk i m Pyże A		
6	Level in Pay Matrix	*	Pay Rs.		Grade Pay Rs.		
7	Whether the employee belongs to SC/ST/OBC/UR (Tick(√) relevant column)		SC	ST	OBC		UR
8	Name of the ward for whom scholarship is applied (Tick(√) relevant column)			Name	Male	Female	
9	Date of Birth of Son/Daughter for whom scholarship is applied	· · ·	Day	Mor	nth		Year
10	Residential Address	100 DECEMBER OF THE PROPERTY O					

11	Telephone Numbers(with STD Code)			Re	ailway: esidence obile:	:										
12	Details of Institution/Courses and	d du				Cours	se, tl	ne wa	rd is	nov	v stu	udyir	ng:			
	Name of the Institution with Address	th Course		Duration of the Course			Date of joining the Course			Indicate the year of Study						
				From To					I	II	111	IV	V			
	•															
13	Fees paid for the current year	ar :		Υe	ear					Amount Rs.						
14	Bank account in the name of ward is mandatory if the ward is a major (Copy of first page of savings Bank Pass Book to be enclosed)															
	Name and Address of the Bank				Savings Bank Account Number											
The state of the s				MICR No.					IF	IFSC No.						
15	In case of minor joint account with the employee is mandatory (Copy of first page of savings Bank Pass Book to be enclosed)															
	Name and Address of the Bank			Savings Bank Account Number												
							***************************************	2	ß	_					,	
					: MICR No.						IFSC No.					
16	Amount of scholarship received during the previous year from CSBF		ng	4.4	: Year					Amount Rs.						
17	Whether the scholar referred to above is in receipt of scholarship or stipend or free concession from any other source? If so, give complete details thereof (Tick(√) relevant column)		Ve		: Year					No						
18	Has He/She applied for any other Scholarship under SBF for the complete detail thereof (Tick(√) relevant column)	urre	nt		Yes		Ť			No	D					
19	If any other child is getting Scholarship from SBF? Give det	tails.		Contraction (Contraction Contraction Contr	Yes/No		ick(<i>l</i>)					-			



Certify that:		
is (b) Pa d (c) Al	enjoying the education articulars shown regardir eclaration.	Son/Daughter(Name) al aid that has been applied for ng my Sons/Daughters are as furnished by me in pass ove are true to the best of my knowledge and if found to be ken up under D&A Rule.
Station:		Signature of the employee:
Date :		Designation :
Certif	fied that the particulars	given against columns 1 to 19 are correct
Station:		Signature of the immediate supervisor:
Date :	CEDTIEN	Designation : CATE BY DEPARTMENT
Forwarded	to the Chairman, Centra	lumns 1 to 19 above have been checked and found correct. I Staff Benefit Fund Committee, General Manager's Office,
Station:	00003 for consideration.	
Date :		Signature and designation of the controlling officer
CERT	IFICATE BY THE EDUC	ATIONAL INSTITUTION/COLLEGE/UNIVERSITY
Certifie	ed that	(student's name) is a
bonafide s	student of this institution.	(name of the Institution)
and is stud	lying in	(name of the course)
(discipline)	(I/II/III/IV/V year (year in	which studying) during the academic year
Station:		
Date :		

