



**ALUMNI ASSOCIATION OF SRI RAMACHANDRA INSTITUTE OF  
HIGHER EDUCATION AND RESEARCH**  
(DEEMED TO BE UNIVERSITY)

**SRAA PG SCHOLARSHIP APPLICATION FORM**

<b>DETAILS</b>		
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs		
First Name:		Last Name:
Photograph: <b>(Affix Recent Passport Size Photograph)</b>	<div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto; text-align: center; padding: 20px;"><b>PHOTO</b></div>	
Permanent Address:		
Address for communication:		
Suburb:	State:	Postcode:
Telephone:	Mobile:	
Email:		
Date of birth:	Age:	
Citizenship: <input type="checkbox"/> Indian citizen <input type="checkbox"/> Others (Please Specify)		
Aadhar Number:		

## QUALIFICATIONS AND ACADEMIC INFORMATION

Please list your qualification *(please attach a copy of your academic transcript and degree certificates)*

UG Degree: (Group B courses)

1. B. Sc (Hons) Sports & Exercise Sciences
2. B.Sc. (Hons) Medical Microbiology and Applied Molecular Biology
3. B.Sc. (Trauma Care Management)
4. B.Sc. Clinical Nutrition
5. B.Sc. Bioinformatics
6. B.Sc. Health Informatics
7. B.Sc. Data Sciences
8. B.Sc. (Hons) Environmental Health Sciences
9. B.Sc. Applied Psychology
10. B.Sc. Clinical Research
11. B.Sc. (Hons) Medical Laboratory Technology
12. B.B.A. Hospital & Health Systems Management

Institution Name:

Date awarded:

Year of Completion:

Are you a rank holder or gold medalist in your course of study:  YES  NO

*If yes, provide the following details*

Have you applied for any other scholarships or stipend from other agencies?

Yes  NO

*If yes, provide the following details*

Name of scholarship/stipend for which you have applied:

### Personal Information:

Father / Mother Name:

Father / Mother Occupation:

Place of Birth:

Mother Tongue:

Annual Income of Parent:	Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single
Residential address of Parent:	Permanent address of Parent:
Whether the applicant is employed? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>(If yes, the applicant must provide details)</i>	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Whether SC/ST/OBC: Yes <input type="checkbox"/> No <input type="checkbox"/> <i>(If yes, enclose the relevant copy of the certificate)</i> Name of the caste / Sub-caste..... Whether Physically Challenged: Yes <input type="checkbox"/> No <input type="checkbox"/> <i>(If yes, enclose the relevant copy of the certificate briefly)</i>	
<b>DECLARATION:</b>	
Scholarship will be given only for two years of Rs. 1,00,000/- per student.	
I hereby declare that I have carefully read the instructions and particulars supplied to me and that the entries made in this application form are correct to the best of my knowledge and belief. I understand that association (active or passive) with any unlawful organization is forbidden. If selected, I promise to abide by the rules and discipline of the alumni association. I note that the decision of the alumni association is final in regard to selection for scholarship. I agree that I shall abide by the decision of the alumni association, which shall be final.	
<b>Applicant signature:</b>	<b>Date:</b>
	<b>Place:</b>

**Please send applications to the contact listed below**

**Check List:**

The filled-up application form should have the following enclosures:

- a) Academic Transcripts
- b) Scanned copy of the Degree certificates
- c) Income Certificate
- d) Copy of class 10<sup>th</sup>, 12<sup>th</sup> and UG mark sheets

- e) Copy of rank card of entrance examination
- f) Copy of fee receipt submitted by the student or Admission Letter (for students who are taking admission this year)
- g) Copy of ration card or ID proofs of parents
- h) Crisis document (Death certificate of parent(s) or proof of job loss)
- i) Certificate of family income/BPL certificate/ITR/Certificate from local panchayat office for proof of annual family income
- j) Reference of 2 persons who know the candidate (Head of the department, Faculty members) who have handled classes for the student.
- k) Aadhaar ID or address proof
- l) Bank account details of the parent (passbook copy)

**NOTE: Attested Photocopies of all certificates is to be enclosed with the application.**

***Applicants may also be sent through email to [alumni@sriramachandra.edu.in](mailto:alumni@sriramachandra.edu.in)***



## ALUMNI ASSOCIATION OF SRI RAMACHANDRA INSTITUTE OF HIGHER EDUCATION AND RESEARCH

### SCHOLARSHIP ELIGIBILITY

1. The applicant must have been an undergraduate student of Sri Ramachandra Institute of Higher Education and Research. Only alumni of Sri Ramachandra Institute of Higher Education and Research are eligible to apply for the Scholarship.
2. The students who have passed University examinations (annual or semesters) without arrears up to the previous semester/year are only eligible to apply.
3. The total Scholarship sanctioned amount will be Rs.3,00,000/- and the amount sanctioned for one student will be Rs. 50,000 /- per year for two years duration. The sanctioned amount will be eligible for three students per year.
4. Acknowledgements and grant from other funding agencies must be declared. Statement of conflict of funding must be provided.
5. This scholarship will be awarded to the students whose family annual income is below **5 lakhs or to provide 3 years Income certificate/IT certificate/Bank certificate.**
6. The Scholarships to be awarded will be towards full or partial tuition fee payable by the students and are tenable for the year of award only.
7. The application form must be duly filled and submitted within the deadline.
8. If the candidates fail in any exam or discontinue the study during the process, the scholarship will also be cancelled.
9. The Scholarship selection list will be released after 15<sup>th</sup> March of every year.