TALENTED STUDENTS' SPONSORSHIP 2023-24

Important instructions:



- 1) All columns must be filled up and no column should be left blank.
- 2) Application must be filled up in candidate's own handwriting.
- 3) Students scoring 80% and above from Madhyamik level are eligible to apply.
- 4) Send the filled-up application form along with the required documents to the address mentioned in "Annexure: A"
- 5) For any queries contact us @ 7890967325 / 9903761504

The following supporting documents should be submitted along with the application:

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- 1) Certificates and Marksheets showing marks secured from Madhyamik (10th std.) and onwards.
- 2) Income of parents certified by any person mentioned in the brackets. (Gram Pradhan, Councilor, MLA, MP, Member of Zila Parishad, B.D.O. or any Govt. Officer).
- 3) Two recent color passport-size photographs (non-attested) of the applicant.
- 4) Proof of admission to the current course and the tuition fee paid/payable per annum duly certified by the Institution.

Last date of form submission: 10th September, 2023

1. PERSONAL	DETAILS:			
Full Name (Block Lo	etters):	3 . 6	Affix a passport	
Male /Female:	1			
Date of Birth (dd/mi	m/yyyy):			
SBI a/c no. of the car	ndidate:	JKHE		
IFSC Code:	Branch nar	ne:		
Permanent Address	- 70	S SEK	·	
Present Address: -				
G 4 1 1 2				
Contact details: -	G		ID Lat. 11	
Sl. No.	Contact No.	Name and	l Relationship	
E-mail ID (if any): -		Mobile No.: -		
LinkedIn (if any): -		WhatsApp No.: -		

2. EDUCATION DETAILS: -

Class	Name of the Institution	Year of passing	% Marks obtained
Madhyamik			
H.S. (10+2)			
Under Graduate			
Post-Graduate			

3. CURRENT EDUCATION DETAILS: -

Course/Class Name:	
Department/Stream:	The second second
Institution Name:	MASS IN STREET
Institution Address:	
Name of the Entrance test with RANK No:(if applicable)	
Year Appeared: -	
Duration of the course:	WAND KEEKS
Year of Admission:	
Year of completion (mustspecify month & year)	US SERVE
If the candidate receives anystipend/scholarship/ or any other Govt. scheme. If yes, please specify with name, nature of scholarship and amount in rupees.	
Expenses per Year	i) Admission and Institution fee: Rs ii) Books: Rs iii) Hostel (if applicable): Rs
	iv) Private tuition fees: Rs
	Total: Rs

4. FAMILY DETAILS:

Relation	Full Name	Age	Occupation	Education	Source offunding (if studying)	Annual Income
Father						
Mother						
Brother(s)						
Sister(s)		24	- And			

	What is	your future	goal?	(Mandatory))
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DECLARATION BY THE APPLICANT:

I, hereby declare that all the above information furnished by me is true. In case, any discrepancy is noticed, MUKTI has every right to terminate my sponsorship. I declare that my character and behavior will be exemplary and I shall maintain high scholastic standards and values, thereby setting an example for others. I will inform MUKTI of all changes in the course of my sponsorship and the course ending period. I will also attend any kind of seminar/ programme /workshop/ meeting as will be informed to me. Failing to do so will result in the cancellation of my sponsorship. I will engage myself in social work activities (Min.8 Hrs. per Month) along with my study.

I also give my consent to Mukti to share and release my credentials in the forms of audio, videos and photos in social media for fundraising towards social cause.

Place:	Signature of the applicant
Date:	

> DECLARATION BY PARENT/GUARDIAN:

I, hereby declare that the above information furnished by my ward is true and there is no factual error or suppression of facts or false information. I am fully responsible for the accuracy of the information furnished in the application. In case of any discrepancy, I agree to refund the money received as a sponsorship to MUKTI. I am also fully aware of the conditions pertaining to the continuity of sponsorship.

I also give consent to Mukti for sharing the credentials of my ward through any form of social media for social and fundraising causes.

Place:	Signature of Parent/Guardian		
Date:			

Questionnaires (Please tick carefully, any wrong answer will cause cancellation of the application)

YES

NO

	 ,
1. Are you female?	
2. Do you stay in a village?	
3. Is anybody employed (service/job) in your family?	
4. Are you staying at your home for your studies?	
5. Are your parents (father and mother) alive?	
6. Are you studying in a government institution?	
7. Do you give tuition to other students?	
8. Are you Physically Handicapped?	
9. Are you involved in any co-curricular activities?	
10. Are you getting scholarships from any other sources / availing govt. funding?	

Responsibilities of a scholarship holder:

- 1) You are requested to inform Mukti in case of a change in contact number or address.
- 2) In case of discontinuation of your study or change in course, you need to inform Mukti.
- 3) You need to invest a mandatory 100 hours of social work in a year as part of the Mukti Sathi initiative.
- 4) You need actively participate in Value Education and Health (Yoga) classes as part of the Mukti Sathi initiative.
- 5) You may be requested to be present for an in-person/virtual meeting with sponsor when sponsor wishes to meet.
- 6) You may be requested to record and send video or written messages to sponsor /Mukti.
- 7) You need to be present in person or online as decided by Mukti, for meeting with sponsor.
- 8) Sponsor can directly call you and request your well-being and study-related information and your information will be true and honest always.
- 9) In any circumstances you can't misbehave with your sponsor and any staff of Mukti.
- 10) We request you to come forward to help by guiding/motivating/sponsoring needy students after your establishment in your professional career.

Annexure: A

To, The Secretary, Mukti 22 Canal Side Road, Garia, Kolkata- 700084

TO WHOM IT MAY CONCERN

I do hereby declare that
student of our institution and pursuing
(class/year with stream). Considering his/her family's economic condition, it would be a
great help if MUKTI helps this needy student to shape his/her future in a better way.
Thanking You, Signature of the Head of the Institution
Institution address and seal
Phone no. of Institution:
Date:
Place: