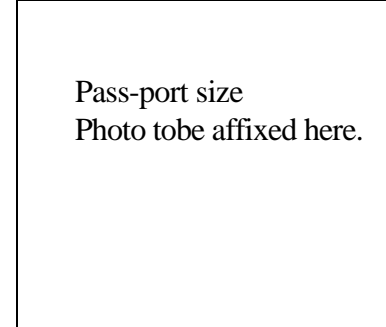


APPLICATION FORM.
STATE SPECIAL MERIT SCHOLARSHIPS OF THE GOVERNMENT OF ANDHRA
PRADESH FOR TOP RANKING BOYS AND GIRLS FOR THE YEAR 1991-92.

N.B. :- Each item should be read carefully before the form is filled. No change will be permitted after the Application has been submitted. If any entry found to be incorrect, the Scholarship if awarded, will be liable to be cancelled.



1. Name in full(in Block Letters). . .
2. Place and Date of Birth. . .
3. (i)Fathers's name or if father is not
alive the Guardian's name. . .
- (ii)Present Postal Address. . .
- (iii)Permanent Address: . .
4. Whether the Father/Guardian is dead or alive. . .
5. Name and Address of the College from which the
Scholar has passed Intermediate during 1990-91.
(i.e., April/1991).

Name of the College.	Roll No.	Years of pass	Rank/Class Secured	Aggregate Marks	Percentage of Marks
(1)	(2)	(3)	(4)	(5)	(6)

-
6. Marks obtained in the S.S.C and Intermediate
Examinations. (Attested copies to be enclosed) . .
 7. Name and Address of the Institution, where the
Scholar Secured Admission. . .
 8. Date on which the Applicant was admitted. . .
 9. Course of Study undertaken and subjects offered. . .
 10. Whether the Scholar is in receipt of any other Scholar-
ship or Stripend if so, give full details. . .

DECLARATION - I.

Certified that the Statement made by me in this Application Form are correct.

I declare that in case I am selected for the Scholarship applied, for, I shall devote my full time to the course of study and that I shall not receive another Scholarship Form any other source. I also declare that I shall not participate in stricks and indulge in activities subversive of discipline or public peace and order.

Place:
Date:

Signature of the Candidate.

DECLARATION - II

I declare that in the event of the Particulars given in this Application being found to be false, I shall refund to the Government of Andhra Pradesh, Hyderabad double the amount paid to the Scholar and the Government decision on whether the Declaration of particulars is false shall final beand binding on me.

Place:
Date:

Signature of Parent / Guardian.

JOINING REPORT

CertifiedthatSri/Kum-----
S/o./D/o. ----- was admitted
intomyCollege(Name) .-----
-----,as a regular full time student in Class-
----- on -----1991. The par-
ticulars furnished by the Candidate in this form are correct.

Place :
Date :

Signature of the Head of the Institution.