



# AGNI SHINE Educational Charity Trust

The light of Education... Trust to make India Shining...

## SCHOLARSHIP APPLICATION FORM

THE INFORMATION GIVEN BY YOU ON THIS FORM WILL BE TREATED AS CONFIDENTIAL.

### Section 1: Personal Details

First Name		Last Name		To affix recent passport size color photograph
Date of Birth (DOB)		Gender		
Mother Tongue		Blood Group		
Address Details	Permanent Address		Address for Communication	
Pin Code				
Contact No		Mobile No		
E-mail Address				

### Section 2: Parents / Guardian's Family Particulars and Financial Status

Father's Name	
Mother's Name	
Guardian's Name (Relationship with applicant)	
Brother(s) Name	
Sister(s) Name	
Annual Income	
Details of Income from any other member of family	

Office: No.15/B, Easwaran koil street, Salaiyur, Chennai – 600073, Tamil Nadu, India.

Email: [admin@agnishine.com](mailto:admin@agnishine.com) web: [www.agnishine.com](http://www.agnishine.com)

Charity Reg no: 40/2009



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## Section 3: Educational Qualifications

Examination	Institution / University from which passed	Year of Passing	% Marks or CGPA	Grade / Class obtained
SSLC				
HSC				
DIPLOMA				
GRADUATION				

## Section 4: Particulars of the Course (to which scholarship is needed)

Name of the Course	Duration of the course	Name & Address of the Institution

## Section 5: References

Description	Reference 1	Reference 2
Name		
Occupation		
Relationship with applicant		
Address		
Pin code		
Tel. No & Mobile No		
E-mail address		

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## Section 6: Declaration

Do you have any personal relationship with AGNI SHINE trustee(s) or member(s)? [ ] Yes [ ] No

If yes, specify name(s), position(s) and relationship(s):

\_\_\_\_\_

### Declaration Statement

*(Please read the following declaration and must be duly signed in the appropriate places given below. Application incomplete in any respect and /or not accompanied by required documents are liable to be rejected)*

I \_\_\_\_\_, the applicant does hereby declare that:

- The information provided above is true and fully answered to the best of my knowledge & belief.
- I will submit the photocopy of all upcoming semester mark sheets to AGNI SHINE trust.
- Trust has the right to stop the scholarship in case I am failed to clear any one of the upcoming semester examinations.
- I have read and understood the terms & conditions formed by the AGNI SHINE trust or the same were interpreted to me, and the answers entered in the application are mine. I also understand that the rules of the trust are liable to be changed and will accept them in future also.

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Place: \_\_\_\_\_

### List of documents to be attached:

*(You are required to bring original documents and two photocopies of original documents. Originals will be returned after verification done by AGNI SHINE trustee(s))*

- Proof of identity
- Proof of address
- 10th & 12th mark sheet
- Mark sheets of all the semesters (if graduated or Diploma person)
- College offer letter

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