

Government Scholarship 2017-18

PRIME MINISTER'S SCHOLARSHIP SCHEME (PMSS)

Sl.No	Name of the Student	Programme	Amount Rs.
1	Austine James	II B.Sc Biotechnology	27,000.00
2	Kalaivani S	III B.Sc Biotechnology	27,000.00
3	Laxmikanth G	II BE Bio Medical Engg.	27,000.00
4	Sofiya Y	III B.Arch.	27,000.00
5	Krishnan M	II BE Automobile Engg.	24,000.00
Total			132,000.00

BONAFIDE CERTIFICATE FOR SUBSEQUENT PAYMENT OF PMSS

1. It is certified that Ms. / Mr. AUSTINE JAMES is a Bonafide student of KARPAGAM UNIVERSITY. He / she is studying in the I / II / III / IV / V year of one / two / three / four / five years B.Sc. BIOTECH Course. He / she had joined this College on JUNE in the academic year 2016 and the course will be completed in the month of APRIL in the year 2019. (Reg no. 16BTU012)

2. This is also certified that Ms. / Mr. AUSTINE JAMES has successfully completed his / her 1st / 2nd / 3rd / 4th / 5th year and scored the following marks in each semesters.

<u>Year</u>	<u>Marks Obtained</u>	<u>Out of</u>	<u>Percentage</u>
1 st Year (1 st & 2 nd sem)	<u>9.04</u>	<u>10</u>	<u>85.88</u>
2 nd Year (3 rd & 4 th sem)	<u>-</u>	<u>-</u>	<u>-</u>
3 rd Year (5 th & 6 th sem)	<u>-</u>	<u>-</u>	<u>-</u>
4 th Year (7 th & 8 th sem)	<u>-</u>	<u>-</u>	<u>-</u>
5 th Year (9 th and 10 th sem)	<u>-</u>	<u>-</u>	<u>-</u>

3. He / she is continuing the course in 2nd / 3rd / 4th / 5th year.

4. His / Her renewal of scholarship is hereby recommended. His / her Bank Account Number is 36211553018

(CLASS TUTOR)



Office Seal

Date: Sept 06, 2017

Place: COIMBATORE

REGISTRAR
Karpagam University
Pollachi Main Road, Echanari Post.
Coimbatore - 641 021

Signature of Principal / Dean / Registrar
(Stamp of signing official must be affixed)

Note - Bonafide Certificate for subsequent payment of scholarship amount without self attested copies of Mark Sheets (both semesters) issued by the University will not be considered for the payment of scholarship.

27000

Received
Austin James
08/09/17

BONAFIDE CERTIFICATE FOR SUBSEQUENT PAYMENT OF PMSS

[15BTU026]

1. It is certified that Ms. / Mr. KALAIIVANI S is a Bonafide student of KARPAGAM UNIVERSITY. He / she is studying in the I / II / III / IV / V year of one / two / three / four / five years BSC. BIOTECHNOLOGY Course. He / she had joined this College on 13.1.2015 in the academic year 2015 and the course will be completed in the month of APRIL in the year 2018.


2. This is also certified that Ms. / Mr. KALAIIVANI S has successfully completed his / her 1st / 2nd / 3rd / 4th / 5th year and scored the following marks in each semesters.

<u>Year</u>	<u>Marks Obtained</u>	<u>Out of</u>	<u>Percentage</u>
1 st Year (1 st & 2 nd sem)	_____	_____	<u>8.39 (CGPA)</u>
2 nd Year (3 rd & 4 th sem)	_____	_____	<u>8.50 (CGPA)</u>
3 rd Year (5 th & 6 th sem)	_____	_____	_____
4 th Year (7 th & 8 th sem)	_____	_____	_____
5 th Year (9 th and 10 th sem)	_____	_____	_____

3. He / she is continuing the course in 2nd / 3rd / 4th / 5th year.

4. His / Her renewal of scholarship is hereby recommended. His / her Bank Account Number is 20312254806

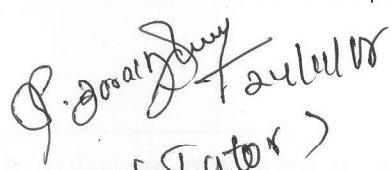
Office Seal


REGISTRAR 24/11/17
 Karpagam University
 Pollachi Main Road, Eachanari Post.
 Coimbatore - 641 021

Date: 24/11/17Place: Coimbatore

Signature of Principal / Dean / Registrar
 (Stamp of signing official must be affixed)

Note - Bonafide Certificate for subsequent payment of scholarship amount without self attested copies of Mark Sheets (both semesters) issued by the University will not be considered for the payment of scholarship.


 (Tutor)
 G.R.P. - abe
 24/11/17

Renewal.
 ₹ 27,000 per year.

₹ 24,000
 ₹ 27,000
 ₹ 27,000

received

BONAFIDE CERTIFICATE FOR RENEWAL OF SCHOLARSHIP

1.	Name of Student	Ms/Mr. <u>G. LAXMIKANTH</u>					
2.	Name of College	<u>KARPAGAM UNIVERSITY</u>					
3.	Name of Course (Full Form)	<u>BIO-MEDICAL ENGINEERING</u>					
4.	Name of Branch/Stream of Course(if any)	<u>(B.E) BRANCH</u>					
5.	Total Duration of Course (In years)	<u>4 years</u>					
6.	College/Institute Joined on (Academic Year)	Month <u>JULY</u> Year <u>2016</u>					
7.	Course will complete on	Month <u>MARCH</u> Year <u>2020</u>					
8.	He/She is Continuing the Course in	2nd / 3rd / 4th / 5th year. (Tick out)					
9.	Student is getting Scholarship / Stipend / any other financial assistance from this College/ Institute/State Govt or from any other sources/agencies except PMSS(KSB). (Note : NOT TO MENTION THE SCHOLARSHIP AMOUNT RS 27000/- (GIRLS) & RS 24000/- (BOYS) OF PMSS (KSB)	(a) Rs. _____ per month/ year/ semester* (* Please strike out which is not applicable, if you will not strike out the option, it will be assumed as monthly) (b) If not getting, write NIL : _____					
10.	Student has cleared all subjects in first attempt in each semester of previous year for award of scholarship for subsequent year.	Yes / No (Tick out)					
11.	Student has successfully completed his/her 1st / 2nd / 3rd / 4th / 5th year ((Tick out) and scored the following marks in each semesters/year without fails:-						
	Year	Exam Held on (Month & Year)	Result Declared on (Month & Year)	Mark sheet issued by university on (Month & Year)	Maximum Marks	Marks Obtained	Percentage
		1st 2nd	1st 2nd	1st 2nd	1st 2nd	1st 2nd	1st 2nd
	1 st Year (1st & 2nd sem)	Nov 2016 Apr 2017	Dec 2016 Jun 2017	June 2017 July 2017	800 800	685 645	85% 80%
	2nd Year (3rd & 4th sem)						
	3rd Year (5th & 6th sem)						
	4th Year (7th & 8th sem)						
	5th Year (9th & 10th sem)						

Round Stamp of CollegeDate 14-10-17Place Cutback

Signature of Vice Chancellor/Principal/ Vice Principal/Dean/ Associate Dean/ Registrar/Dy Registrar/Director/Dy Director
(Rubber Stamp of signing official must be affixed)

* Signature of VC/Principal/Vice Principal/Dean/Associate Dean/Registrar/Dy Registrar/Director/Dy Director only will be considered.

INSTRUCTIONS FOR STUDENTS

1. Please upload Mark sheets issued by University in original (Both Semesters/Academic year). Cases of computer generated/ photocopy mark sheets will be rejected. Student can apply for renewal for subsequent payment of PMSS within one year of declaration of result.
2. Signature of Vice Chancellor/Principal/Vice Principal/Dean/Asst Dean/Registrar/Dy Registrar/Director/Dy Director only will be considered on bonafide certificate otherwise application will be rejected.
3. Please do not overwrite or use of correction pen / whitener otherwise application will be rejected.
4. As per existing policy on Prime Minister's Scholarship Scheme (PMSS) the student must clear his/her all subjects in first attempt in each semester of previous year to get the benefit of PMSS in subsequent years. Those failed and re-appeared will not be entertained even if they have cleared their exams in subsequent attempt.
5. I have read and understood the Check List, FAQ and instructions available on website www.ksb.gov.in. I also certify that information provided by me is correct and true to best of my knowledge. I have not forged or given wrong information, if found, my application is liable to be rejected and I will be solely responsible for that.

G. Lakshmi
(Signature of student)

Date :

Name of Student G. LAXMIKANTH

S. Jayalal
14/10/17

14/10/17
14/10/17

Dean (P.E)

Received
G. Lakshmi
14/10/17

NATIONAL SCHOLARSHIP PORTAL 2.0

REGISTRATION DETAILS

APPLICATION ID	TN201617011761120	RENEWAL DATE	07/12/2017
APPLIED FOR SCHEME	PRIME MINISTER'S SCHOLARSHIP SCHEME FOR CENTRAL ARMED POLICE FORCES AND ASSAM RIFLES		
STATE OF DOMICILE	TAMIL NADU	SCHOLARSHIP CATEGORY	
NAME OF STUDENT	SOFIYA Y	DATE OF BIRTH (DD/MM/YYYY)	27/11/1997
GENDER	FEMALE	RELIGION	
COMMUNITY/CATEGORY		FATHERS NAME	R YAKUB KHAN
MOTHERS NAME	Y RAZIYA BEGAM	ANNUAL FAMILY INCOME	550000
AADHAR NUMBER	991189160371	MOBILE NUMBER	8763395286
EMAIL ID	KHANYAKUB1969@GMAIL.COM	DAY SCHOLAR/HOSTELER	HOTELER

ACADEMIC DETAILS

PRESENT INSTITUTE	KARPAGAM ACADEMY OF HIGHER EDUCATION, COIMBATORE		
PRESENT CLASS/COURSE	BACHELOR OF ARCHITECTURE(B.ARCH(AR))	CLASS START DATE	19/06/2017
PRESENT YEAR	3	MODE OF STUDY	
PREVIOUS BOARD/UNIVERSITY NAME	ANNA UNIVERSITY, CHENNAI		
PREVIOUS CLASS/COURSE NAME	BACHELOR OF ARCHITECTURE(B.ARCH(AR))	PREVIOUS PASSING YEAR	2
PREVIOUS CLASS(%)	70	10TH CLASS ROLL NO.	
10TH CLASS PASSING YEAR		10TH CLASS BOARD NAME	
12TH CLASS ROLL NO.		12TH CLASS PASSING YEAR	
12TH CLASS BOARD NAME			
ADMISSION FEE	2000	TUITION FEE	130000
MISC FEE	12000		

BASIC DETAILS

IS ORPHAN	NO	IS DISABLED	NO
TYPE OF DISABILITY	-	PERCENTAGE OF DISABILITY	-
MARITAL STATUS			
IFSC CODE	SBIN0012778	BANK ACCOUNT NUMBER	35384631031

WARB DETAILS


NAME OF PERSONNEL(PARENT'S NAME)	R YAKUB KHAN	PPO NO.	
CATEGORY	CATEGORY-G--WARDS OF SERVING CAPFS & AR PERSONNEL (PBOR) SUBJECT TO AVAILABILITY OF SCHOLARSHIP.	FORCE NO	914524218
RANK	HEAD CONSTABLE		
WHETHER SERVING/ RETIRED/ DECEASED/ DISABLED	SERVING	UNIT/LAST UNIT/ESTT	3RD NDRF BN MUNDALI CUTTACK ODISHA

CONTACT DETAILS

STATE	TAMIL NADU	DISTRICT	TIRUNELVELI
BLOCK			
ADDRESS	FLAT NO. 20 BALAJI NAGAR NALLAVANPALAYAM THIRUVANNAMALAI TAMIL NADU606603	PIN CODE	0

SIGNATURE OF CANDIDATE

27,000


REGISTRAR
 Karpagam Academy of Higher Education
 (Section 3 of UGC Act 1956)
 School Institute College
 Coimbatore - 641 021.
WITH STAMP

(Please do not overwrite or use correction Pen/Whitener otherwise application will be rejected)

1.	Name of Student	Ms/Mr. M. KRISHNAN
2.	Name of College	KARPAGAM ACADEMY OF HIGHER EDUCATION.
3.	Name of Course (Full Form)	BE (AUTO MOBILE ENGINEERING)
4.	Name of Branch/Stream of Course(if any)	BE AUTO MOBILE ENGINEERING
5.	Roll Number / Registration Number	17RBEAE011
6.	Studying in the 1 st / 2 nd / 3 rd / 4 th / 5 th year	2nd YEAR
7.	(a) Total duration of Course (In years) (b) Date of Admission in college & Academic Year (c) Course will be completed in month of (approx)	2017 TO 2021 Date 07/08/17 Academic Year 2017 Month APRIL Year 2021
8.	(a) Professional Degree Course approved by (UGC/AICTE/MCI/DCI etc) (b) College / Institute is affiliated to (Name of the University)	UGC DEEMED UNIVERSITY
9.	Student is getting scholarship/stipend/any other financial assistance from this College/ Institute/State Govt or from any other sources/agencies except PMSS(KSB). Note:- NOT TO MENTION THE SCHOLARSHIP AMOUNT 27000/- (GIRLS) & 24000/- (BOYS) OF PMSS (KSB)	(a) Rs. _____ per month/ year/ semester* (* Please strike out which is not applicable, if you will not strike out the option, it will be assumed as monthly) (b) If not getting any scholarship, write NIL _____

Round Seal/Stamp of College

Date _____

Place _____

Signature of Vice Chancellor/Principal/Vice Principal/Dean Associate Dean/Registrar/Dy Registrar/ Assistant Registrar/ Director/Dy Director*
(Rubber Stamp of signing official must be affixed)

* Signature of Vice Chancellor/Principal/ Vice Principal/ Dean/ Associate Dean/ Registrar/ Dy Registrar/Assistant Registrar/Director/Dy Director only will be considered.

CERTIFICATE FROM STUDENT & ESM

- I, _____ (Student), have read and understood the check list, FAQ and instructions available on website www.ksb.gov.in. I also certify that information provided by me is correct and true to best of my knowledge. I have not forged or given wrong information, if found, my application is liable to be rejected and I will be solely responsible for that. I am also aware that it will invite criminal proceedings.
- I have scanned Ex-Serviceman Certificate from ZSB (Annexure-1), Bonafide certificate (Annexure-2), Certificate from bank (Annexure-3), 10th class certificate, MEQ Certificate, semester wise mark sheets, examination passing certificate, bank pass book, & aadhaar card in original and uploaded.
- I certify that I have submitted only one application. If duplicate application is found, all my applications are liable to be rejected. I will be held responsible for the same.
- As per existing policy on Prime Minister's Scholarship Scheme (PMSS) the student must clear his/ her all subjects **in first attempt** to get the benefit of PMSS in subsequent years. Those failed and re-appeared will not be entertained even if they have cleared their exams in subsequent attempt.
- Please do not overwrite or use correction Pen/Whitener otherwise application will be rejected.
- Signature of Vice Chancellor/Principal/Vice Principal/Dean/Associate Dean/Registrar/Dy Registrar/ Assistant Registrar/Director/Dy Director only will be considered on Bonafide Certificate otherwise application will be rejected.
- Please carry 10th class certificate, MEQ certificate, Aadhaar Card, Bank Pass Book, proof of category & Annexure 2 & 3 in original to avoid number of visits to ZSB while obtaining signature on Annexure-1 from ZSB.

(Signature of ESM)

Name of ESM _____

Dated : _____

(Signature of Student)

Name of Student _____

Dated : _____

Received
Krishna
26/7/18