

KARPAGAM ACADEMY OF HIGHER EDUCATION

(Deemed to be University)
(Established Under Section 3 of UGC Act, 1956)

Pollachi Main Road, Eachanari Post, Coimbatore - 641 021, Tamilnadu, India. Phone: 0422 - 2980011 - 14, 6471113, 14 | Fax: 0422 - 2980022-23 | Email: info@karpagam.com

Government Scholarship 2017-18

SOUTHERN RAILWAY-ASSISTANCE FROM STAFF BENEFIT FUND

Sl.No	Name of the Student	Programme	Amount
			Rs.
1	Roseline Jenifer I	II B.Sc Microbiology	12,000.00
2	Catherin PentoPancy.J	I B.Com	5,000.00
3	Jeevitha R	I M.Sc Microbiology	15,000.00
4	Raghu M	III B.Com (PA)	12,000.00
5	Monica M	III B.Com CA	13,000.00
6	ArjunK.A	I B.Sc Computer Science	80,000.00
	1	Total	137,000.00

SOUTHERN RAILWAY

ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education (DEGREE)

For wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each Child)

(Maximum 2 Children at a time only)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	S. IRUDAYARA J.							
2	Designation/Office/Division/Unit	:	SP. TECHNICHW EWM SXT/PIJ						77.	
3 (a)	PF Number	:	*************	038	336	182				
(b)	Staff/Ticket Number	:		247	1.		· ·			
4	Bill Unit No.	:		055	71) .				1 m	
5	Station/Bill Preparing Office		Cum Sail				17			
6	Pay Band & Grade Pay	:	Pay Band Rs.			Grade Pay Rs.				
				3900	2 2		4200/-			
7	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)	•	SO		ST	OBC		V	UR	
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)	·		N	ame		Ma	ale	Fe V	male
			RE	SEL	INE	SENIFE	R	2		
9	Date of Birth of Sen/Daughter for whom Scholarship is applied		Day Month)	/ear	A
		. I special	l	3	0	6	1	9	9	9.

Cish!

, per year render

18	Has He/She applied for any other	Yes		No
	Scholarship under SBF for the current year? If so, give complete details thereof [Tick (√) relevant column]			
19	Is any other child getting Scholarship from SBF? Give Details.	¥es/No [T Details:		©
y that:				
(a) N (Nar	No student other than my Sen/Daughte?. Rome) is enjoying the educational aid that has b	SELINE :	senifea	X
(b) F	Particulars shown regarding my sons/daughte	ers are as furnis	hed by me i	n pass declaration.
	All the details furnished above are true to the libe taken up under D&A Rules.	best of my know	wledge and i	f found to be false in future, I
tation:	Signature of	of the Employee		Eetwier ow Journ Soit
ate:			SR-J.	ECHNICIAN ICUMISAT
	Certified that the Particulars given again	inst columns 1	5	क्टो प्रिष्ट अनुमाग इंजीनियर प्रिक अनुरक्षण शाप
tation:	975 Signature of the Imme	ediate Supervis	or:	त.व.द्व.सकमेशाला
ate:	Designation CERTIFICATE	BY DEPARTM	S. M IENT S.	रेलवे, षोत्तनूर enior Section Engineer echanical Mill Wright Shop &T Workshop, S.Rly,
The	particulars furnished against columns to 1 to	7 above have	been check	ed and found consect.
	warded to the Chairman, Central Staff Be	enefit Fund Co	ommittee, G	eneral Manager's Office,
Statio	n			
Date:				
		Signature an Controlling C		on of the
		AL INSTITUTIO	N/COLLEG	E/UNIVERSITY
	CERTIFICATE BY THE EDUCATION	1 TE 11 40 11 1 0 13 4		
N.	CERTIFICATE BY THE EDUCATION. Certified that ROSELINE JEN	(16)	MBUD52)	name) is a

.......... (discipline) (HII / HIT / LIVI - Year (year in which studying) during the academic year 2017 - 2018: COIMBATORE Station: 28:11:2014 Karpagarn University Pollachi Main Road, Bachanari Post .Combatore - 641.021.....

Seal of College/institution

Signature of the Head of the Institution with seal

Poseline Serige. 30:11:2017

SOUTHERN RAILWAY

ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education (DEGREE)

For wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each Child)

(Maximum 2 Children at a time only)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee			1	To	- Ď.,	08	LINV
2	Designation/Office/Division/Unit	:	,					
3 (a)	PF Number	:		<u>s</u>				87/199
(b)	Staff/Ticket Number			·	03	835	-947	
4	Bill Unit No.		1			355		
5	Station/Bill Preparing Office						01/	
6	And the second s	1	Cwm/0/3			The street of th		
100	Pay Band & Grade Pay		100000000000000000000000000000000000000	ALCOHOLD STREET		Rs. 4800	Grade 4	Pay Rs.
7	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)	:		C	ST	OBC		UR
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)	7	. Car		lame		Male	Female
							pine)	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	D	ay	Mo	onth		'ear
			2	4	1	2	19	3 90

dishi

12/17

/			
18	Has He/She applied for any other	Yes	No
	Scholarship under SBF for the current year? If so, give complete details thereof [Tick (1) relevant column]	-	No
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick Details:	(4)]
I certify that			Company of the Compan
(a) I (Na	No student other than my Son/Daughters me) is enjoying the educational aid that has b	een applied for.	RIN PENNICO PANCY
(b) l	Particulars shown regarding my sons/daughte	ers are as furnished	by me in pass declaration.
	All the details furnished above are true to the li be taken up under D&A Rules.	best of my knowled	lge and if found to be false in future, I
Station:	LAMANUR Signature of	of the Employee;	A. THE
Date:		THIT ST	Ar JAS Sr. Teah/ms/sri
	Certified that the Particulars given aga	inst columns 1 to 7	are correct.
Andres Paul Maria	p · / s		t des milit same
Station:		ediate Supervisor:	the stoke X almany
Date:	A.J.: Ll.: 2017 Designation	1;	प्रविक्त प्रोत्ति। प्रविक्त प्रोत्तिगर
The	CERTIFICATE particulars furnished against columns to Vito	BY DEPARTMENT 7 above have bee	
	warded to the Chairman, Central Staff Be	Number of the E	5 & T Worleins
Chennai – 6	800 003 for consideration.	100000	Todana,
Statio			OSW
Date:	n 		
		Signature and De Controlling Office	
	CERTIFICATE BY THE EDUCATION	AL INSTITUTION/O	COLLEGE/UNIVERSITY
W.	Certified that A. J. Cathenn	pennitor ancys	[ITCMUOID] Student's name) is a
bonaf	ide student of this institution Lumajum!	Auding 1 lts	Shw Lelier Hame of
the in:	stitution) and is studying inl.dCvmJ	year	(name of the Course)
	n.mv.n² (discipline) (ar in which studyin	g) during the academic
	cimbation		Ala mia
	1 Mate		PEGISTRAR
Date:		Karpagam Aca	demy of Higher Education straity Under Section 3 of UGC Act 1956)
	SCOMBITORE E		rany onet seed, Eschanari Post, imbatere - 641 021. Of the Institution with seal
λ	Seal of College/institution Signal	gnature of the Heat	Received
14 M	wally, of	My Challe	- Ci- C
'VA'	X 7		

SOUTHERN RAILWAY ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education (DEGREE)

For wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each Child)

(Maximum 2 Children at a time only)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	R. RAVICHANDRAN				
2	Designation/Office/Division/Unit		S. & Teen IP/Elee / NON NO				
3 (a)	PF Number	:	154 04576056				
(b)	Staff/Ticket Number	;	UEL 511				
4	Bill Unit No.	:	0 dd				
5	Station/Bill Preparing Office		Srdpo/DDU				
6	Pay Band & Grade Pay		Pay Band Rs. Grade Pay Rs. 9000 - 34800 Ax00				
7	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)		SC ST OBC UR				
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)		Name Male Female				
			JEEVATHAROOCH - V				
9	Date of Birth of Son/Daughter for whom Scholarship is applied	i	Day Month Year				
			23051997				

Noni

	18	Has He/She applied for any other	Yes	No
	18 18 18 18 18 18 18 18 18 18 18 18 18 1	Scholarship under SBF for the current year? If so, give complete details thereof [Tick (v) relevant column]	√)	
	19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (√)] Details:	
I certif	y that	:		
	(a) (Na	No student other than my Sen/Daughter me) is enjoying the educational aid that has b	DEE JEE	VITHA R
	(b) I	Particulars shown regarding my sons/daughte	ers are as furnished by n	ne in pass declaration.
	(c) A	All the details furnished above are true to the libe taken up under D&A Rules.	best of my knowledge a	nd if found to be false in future, I
	ation:	NNNN Signature	of the Employee:	D. P. Charles
Di	ate:	Designatio	n: L	S. T. Tech /P/Flee / KDON
A. A.	त इंड	र्गितवर Geriffied that the Particulars given aga	inst columns 1 to 7 are o	correct.
40 %	4	Signature of the Imm	ediate Supervisor:	m Varsum
D.C. A.	Ma ate:	namadurai. Designatio	वरि	ष्ड अनुभाग / वोजली / मानाभद्दरै
1 th a	- 1	51		Sr. Section
200	The	particulars furnished against columns to 1 to	7 above have been che	giree La El EG de Manamadurai
		warded to the Chairman, Central Staff B	enefit Fund Committee	, General Manager's Office,
Chen	nai – 6	600 003 for consideration.		
.8				
	Statio		∞	
	Date:		Circolina and Dagina	rotion of the
<u>~</u>			Signature and Desigr Controlling Officer	nation of the
		CERTIFICATE BY THE EDUCATION	AL INSTITUTION/COLL	EGE/UNIVERSITY
	1	9" Certified that R. JEEVITH	A(ITMB0006) Stude	ent's name) is a
	bona	fide student of this institution KARPAGT		
		nstitution) and is studying in I.M.S.C		
		F.A.R. (discipline) (I / II / III / IV / V Year (y	/	
		2017-2019		
	Statio	0.4		Sh
		1011-	RE	GISTRAR
	Date:	OV-	(Deemed to be Universit	emy of Higher Education by Under Section 3 of UGC Act 1956)
		COVARATORE)	Pollachi Mai	n Road, Eachanari Post.
		Santi College institution	ignature of the Head of	
		The state of the s	1 - 10 100	nd later
	. 15	,000 Rayers. 19 19.12:19	The tracks of the post	cient for your

ME

SOUTHERN RAILWAY

ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education (DEGREE)

For wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each Child)

(Maximum 2 Children at a time only)



(Photo to be attested by Institution/College Authority)

1,	Name of the Employee		M. MURUGAVEL					
2	Designation/Office/Division/Unit		Tech / 11/ms cwm/sgt [w/pTJ					
3 (a)	PF Number		5060					
(b)	Staff/Ticket Number		303					
4	Bill Unit No.		501					
5	Station/Bill Preparing Office		cwm	Isay	PTJ			
6	Pay Band & Grade Pay	•	Pay Band Rs. 5200 - 20200			Grade Pay Rs		
7	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)		sc	ST	OBC		UR.	
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)		MR	Vame АС ₇ Ң	v	Male	Female	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	7	Day	M	onth		Year	
			24	11-	2	19	97	

£.)

/			
18	Has He/She applied for any other	Yes	NO
	current year? If so, give complete details thereof [Tick (\sqrt{)} relevant column]		
19	Scholarship under SBF for the current year? If so, give complete details thereof [Tick (v) relevant column] Is any other child getting Scholarship from SBF? Give Details. Some student other than my Son/Daughter	(√)]	
certify that			
(a) (Na	No student other than my Son/Daughter ame) is enjoying the educational aid that has	M · RAGHI been applied for.	<u>J</u>
(b)	Particulars shown regarding my sons/daugh	ters are as furnishe	ed by me in pass declaration.
(c) sha	All the details furnished above are true to the all be taken up under D&A Rules.	e best of my knowle	edge and if found to be false in future,
Station	Podenur Signature	of the Employee:	M. Muringant
Date:			M. Muringaul Tech lulms
		ainst actumes 4 to	7 are correct
	Certified that the Particulars given ag	amst columns i to	7 are correct.
Station	PODANUR Signature of the Imr	nediate Supervisor	
Date:			
	CERTIFICAT	E BY DEPARTME	NT
Th	e particulars furnished against columns to 1	to 7 above have be	en checked and found correct.
* I b	가득하다 하는 것이 없는 사람들은 그들은 사람들이 그는 사람들이 있는 것이 없는 사람들이 가장하는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이다.	Benefit Fund Com	mittee, General Manager's Office,
Stati	on		
Date			
	CERTIFICATE BY THE EDUCATIO	NAL INSTITUTION	I/COLLEGE/UNIVERSITY
7	"Certified that MRAGHU		(Student's name) is a
bona			
the i	nstitution) and is studying in .B.:.CaM	PA	(name of the Course) .
C	하는 사람들이 가는 그 사람들이 하는 그들은 어떻게 된다면 가장을 받는 것이 되었다. 그렇게 되는 그를 모르게 되었다. 그렇다	yeár in which study	ing) during the academic
			REGISTRAR
Date	OS TE THIS DE WAY	Karpagam .	Academy of Higher Education
٥	SCOUNTATIONE (S)	MPolla	chi Main Road; Bachanari Post;
ceived	Seal of College in the College in th		
() 1.		60) X8 /	3/0

Rec

SOUTHERN RAILWAY ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education (DEGREE)

For wards of all Non-Gazetted Staff

(Separate application forms to be submitted for each Child)

(Maximum 2 Children at a time only)



10/19

(Photo to be attested by Institution/College Authority)

	Name of the Employee		C. MARIAPPAN							
2	Designation/Office/Division/Unit		TECH/GYI/2952 EMA T/SET WIPT						071	
3 (a)	PF Number					760			og tolentatorregnest-o	
(b)	Staff/Ticket Number		2952							
4	Bill Unit No.	9	502					Philipson I company activities		
5	Station/Bill Preparing Office	9	Cwm/sarl				P75			
6	Pay Band & Grade Pay		Pay Band Rs.			Committee Commit	BANKOSE SZOSÁJONENA:	and the state of t	Rs.	
Mary Commence	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)		SC ~		ST	OBC	2800 UR			
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)		1.7.7		ame	A	M	ale	Fe	male
						S trans				
9	Date of Birth of Son/Daughter for whom Scholarship is applied	1	Da	y	Мо	nth			'ear	
			0	2	0	6	1	4)	4	Ĉ.

18	Has He/She applied for any other Scholarship under SBF for the	IYes	No.	egramics and halves a College on Instruction and College of Section 2015 and Sec
ekenturan sebesakan sebagai se	current year? If so, give complete details thereof [Tick (v) relevant column]			gen tallet in deal Browning (Ballet)
40.9	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick Details:	annessen ann aige a' cheann an deann an ann an Ann ann an Ann air an Ann air an Ann an Ann an Ann an Ann an an (
tify that	ооб почина в принципа на п В принципа на принц	allunia as milineauris, a virus musi resuverimininte in materialis e in medica e in menero e in menero e in me	ого в сеце достин — на учисий в того оборого постоя на вод в достинательной высоковательной сым од достой на в	และสารแบบแบบ เกราะ เ
(a) (Na	No student other than my Son/Daughter me) is enjoying the educational aid that has	MONICA. /	7.:	
(b)	Particulars shown regarding my sons/daugh	nters are as furnished	by me in pass declaration.	
	All the details furnished above are true to the label taken up under D&A Rules.	e best of my knowled	lge and if found to be false in	future, I
Station:	POR ANUK. Signature	of the Employee:	30 napour	***
Date:	28/11/2017 Designati		CAUPPLY TECHLONILLE	10 15
	Certified that the Particulars given ag	ainst columns 1 to 7		155 GTW 105
			Λ	
Station:	PTJ Signature of the Imn	nediate Supervisor.	MA	The second secon
Date:	28:11.17 Designati	on:	गरिक्त सवणन इस वीप	-11
		EBYDEPARTMEN	I Symmetry in Engl	
For	particulars furnished against columns to 1 warded to the Chairman, Central Staff I		nittee, Sameral Manager's	ssembly Shop - Office Rid, whit
nnai – 6	00 003 for consideration.		S&T Workshop, S.	Rly, Podanur
Statio	n			
Date:	Service spring the received on the	***************************************	aravan mananan dan	
		Signature and D Controlling Office		
	CERTIFICATE BY THE EDUCATION	NAL INSTITUTION/	OLLEGE/UNIVERSITY	
W.	" Certified that M. Monica L	isccu095)(8	Student's name) is a	
bonaf	ide student of this institution Kanzugam.,	Audemy 7 lbg	her Educating (Name of	
the in	stitution) and is studying in	CIA) III year	(name of the Course)	
mmer	Y (discipline) (⊷II / ÎII / I V /- V Year (y 	rear in which studyin	g) during the academic	
year.			4 -	
Station			4/12/12	v
Date:	delaly	Karpagam Aca	demy of Higher Education	
	OF HIGH		sity Under Section 3 of UGC Act 1956) ain Road, Eachanari Post,	
S	compared Ethn	Signature of the Hea	mbatore - 641 021. If of the Institution with seal	
	1 641 UZI S -11/	00) 1	<u> </u>	
	Month 112	@1211 /2	/	

Rs. 13,000 M. Morica.

SOUTHERN RAILWAY

ASSISTANCE FROM STAFF BENEFIT FUND

Application for Fresh / Renewal of Scholarship for Higher Technical / Professional Education [DEGREE / DIPLOMA]

For wards of all Non-Gazetted Staff

(Separate application/forms to be submitted for each Child

(Maximum 2 Children at a time only)



N' 19th Decer

10S.SI.91 , along

(Photo to be attested by Institution/College Authority)

1	Name of the Employee		SMARIGHA.M					
2	Designation/Office/Division/Unit	1:1	PMAN					
3 (a)	PF Number	1:1		513030	85-			
(b)	Staff/Ticket Number		J/T 5180					
4	Bill Unit No.		06					
5.	Station/Bill Preparing Office	:	MAG	7/PAL	Abban -			
6	Pay Band & Grade Pay		Pay Band Rs.		Grade Pay Rs. 1900/2			
7	Whether the employee belongs to SC/ST/OBC/UR (Tick (✓) relevant column)		sc sc	ST OBC	UR UR			
8	Name of the Ward for whom Scholarship is applied (Tick (✓) relevant column)			ame UN·K·K	Male Fema			
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	: Day Month		Year			
			.2 3	11	199	9		

	Ine Haishe applied for any	other	Yes .	No
	As He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof (Tick (v) relevant		NIL	
	[column]	witt.		
19	Is any other child getting Sch from SBF? Give Details.	nolarship	Yes/No [Tick (1)] Details:	No
certify that				
(a)	No student other than my Son/Da	aughter	ARJUN-EN	(17CSU008)
(Na	ame) is enjoying the educational a	aid that has b	been applied for.	
	Particulars shown regarding my			
(c)	All the details furnished above ar all be taken up under D&A Rules.	e true to the	best of my knowledge and	of the false at tuture, i
Station	DANGALURU	Signature	of the Employee:	
Date:	30.11:17	Designation	n:	PNAN
	Certified that the Particula	ars given ag t	ainst columns 4 to 7 are co	wrect.
स्टेशन प्रबंधक				
Station Station Signature of the Immediate Supervisor:			nediate Supervisor:	द्राभूव रच्ये लासा १- १४४१११६४ अथिए
Date:		Designation	on:	SUGTIFICATI KARANAY, MANGALOSE
* Date				
1 35	orwarded to the Chairman, Ce			
Chennai	600 003 for consideration.		and Samulator,	ostora, manage, a smoo,
210	fion			
Dat			v 2 - X	
	*	*	Signature and Designation Controlling Officer	ation of the
	CERTIFICATE BY THE	EDUCATION	NAL INSTITUTION/COLL	ECENINAEDSITY
	Certified that	o \		
Certified that				
the institution) and is studying in Passe Karpagaro univercity(name of the Course)				
Becomputerscience (discipline) (I/II/III/IV/V Year (year in which studying) during the academic year T^{5+} dear				
				demin
	tion:		V. annagam A	b)
Date	e 6-13-9013 DEMILO	SEE!	(Dosmed to be University	edecay of Maher Education resty Under Section 3 of UGC Act 1956)
	(S COIMBAT(S 641 021)	ORE E		Main Road, Eachanari Post, imbatore – 641-021
	Seal of College/institution		Signature of the Head of t	he Institution with seed
		101/1/1	m	
	10		Chall Car	19
Exaction of the second				
	O'U	Estas It	6/	•
	O VA	flooris	6/1	* · · · · · · · · · · · · · · · · · · ·
		Mexis.	0,000	

Recieved 2.17