

Government Scholarship 2016-17

SOUTHERN RAILWAY- ASSISTANCE FROM STAFF BENEFIT FUND-

Sl.No.	Name of the Student	Programme	Amount Rs.
1	Raghu M	II B.Com (PA)	15,000.00
2	Vinoth K	III BE Civil Engg.	7,000.00
3	Monica M	II B.Com CA	5,000.00
4	Bhaskaran R	IV BE Civil Engg.	7,000.00
5	Roseline Jenifer I	I B.Sc Microbiology	5,000.00
6	Ramesh V	IV BE EEE	7,000.00
7	Vishvanathan B.K	III BE CSE	7,000.00
8	Yuvasri R	II M.Sc Computer Science	6,000.00
Total			59,000.00

(Photo to be attested by Institution/College Authority)

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details: NO	

I certify that:

(a) No student other than my Son/Daughter M. RAGHU
(Name) is enjoying the educational aid that has been applied for.

(b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.

(c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: PODANUR Signature of the Employee: M. Muneer
Date: _____ Designation: T.No: 3032 / M&T / G.III / MS

Certified that the Particulars given against columns 1 to 7 are correct.

Station: _____ Signature of the Immediate Supervisor: _____
Date: _____ Designation: _____

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station: Coimbatore
Date: 28-11-16

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that M. RAGHU (S.P.A.U.O.A) (Student's name) is a
bonafide student of this institution Karpagam University (Name of
the institution) and is studying in B.Com CPA (name of the Course)
II (discipline) II / III / IV / V Year (year in which studying) during the academic
year 2015-18

Station: Coimbatore
Date: 28-11-16

REGISTRAR

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

Seal of College/Institution

Signature of the Head of the Institution with seal



Received

M. Raghu
29-11-16

OK
28/11/16

28/11/16

28.11.16

28/11/16

28/11/16

SOUTHERN RAILWAY

C.S.B.F
SCHOLARSHIP

SOUTHERN RAILWAY

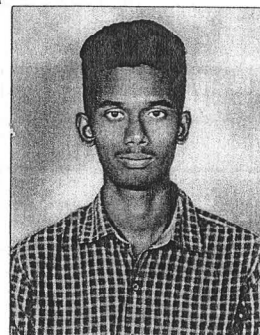
ASSISTANCE FROM STAFF BENEFIT FUND

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)



(14RBECE101)

(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	A. KRISHNA SAMY			
2	Designation/Office/Division/Unit	:				
3 (a)	PF Number	:	11C00103			
(b)	Staff/Ticket Number	:				
4	Bill Unit No.	:				
5	Station/Bill Preparing Office	:				
6	Pay Band & Grade Pay	:	Pay Band Rs.		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)	:	Name		Male	Female
		:	K. VINOTH		✓	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day	Month	Year	
		:	02	07	1997	

7/11/17

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details:	

I certify that:

- (a) No student other than my Son/Daughter
(Name) is enjoying the educational aid that has been applied for.
- (b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.
- (c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: Signature of the Employee:
Date: Designation:

Certified that the Particulars given against columns 1 to 7 are correct.

Station: Signature of the Immediate Supervisor:
Date: Designation:

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office,
Chennai - 600 003 for consideration.

Station:
Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that K. VINOTH (14RBECE101) (Student's name) is a
bonafide student of this institution KARPAGAM UNIVERSITY (Name of
the institution) and is studying in BACHELOR OF ENGINEERING (name of the Course)
CIVIL IIIrd (discipline) (I / II / III / IV / V Year (year in which studying) during the academic
year 2016 - 2017

Station: COIMBATORE

Date: 21.11.2016



Handwritten Signature 22/11/16
REGISTRAR
Karpagam University
Pollachi Main Road, Bachanari Post.
Coimbatore - 641 021.
Signature of the Head of the Institution with Seal

Handwritten Signature 21.11.16
Handwritten Signature 22/11/16
Handwritten Signature 22/11/16
Handwritten Signature 22.11.16
Handwritten Signature 22.11.16

Handwritten Signature
Handwritten Signature
Handwritten Signature
Handwritten Signature
Handwritten Signature

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)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	C. MARIAPPAN					
2	Designation/Office/Division/Unit	:	Techn. 2 / Cwn / 887 / W / P.T.J. 502					
3 (a)	PF Number	:	05677560					
(b)	Staff/Ticket Number	:	2952					
4	Bill Unit No.	:	502					
5	Station/Bill Preparing Office	:	Cwn's 6 W / 887 / P.T.J.					
6	Pay Band & Grade Pay	:	Pay Band Rs.			Grade Pay Rs.		
			31,100/-			2800/-		
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	
			M. MONICA				✓	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day	Month		Year		
	DAUGHTER		02	06	19	98		

6/6/18
10/11/18

	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.	Yes/No [Tick (✓)]	Details:

I certify that:

- (a) No student other than my Son/Daughter M. MONICA
(Name) is enjoying the educational aid that has been applied for.
- (b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.
- (c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: Podum Signature of the Employee: C. Mani
Date: 16/11/16 Designation: Technician / E man

Certified that the Particulars given against columns 1 to 7 are correct.

Station: Signature of the immediate Supervisor:
Date: Designation:

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station:
Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that M. MONICA (15CCU095) (Student's name) is a
bonafide student of this institution KARPAGAM UNIVERSITY (Name of
the institution) and is studying in B.COM (C.A.) - II (name of the Course)
(discipline) I / II / III / IV / V Year (year in which studying) during the academic
year 2015 - 2016 - 2017

Station: Coimbatore
Date: 17/11/2016



Seal of College/Institution

17/11/16
REGISTRAR
Karpagam University
Pollachi Main Road, Echanari Post,
Coimbatore - 641 021

Signature of the Head of the Institution with seal

ok
10/11/16
17/11/16

17/11/16
17/11/16

Rs. 5,000

received
Monica M
18/11/16

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)

Dr. R. Sundara
Dean of Engineering
Karpagam Univer
Eacharari (Post)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	P. PALANI ANNAL					
2	Designation/Office/Division/Unit	:	KHALASI / SGT Curben / PS					
3 (a)	PF Number	:	60180004					
(b)	Staff/Ticket Number	:	-					
4	Bill Unit No.	:	0618713.					
5	Station/Bill Preparing Office	:	SGT Workshop / Podanur					
6	Pay Band & Grade Pay	:	Pay Band Rs.			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)	:	Name R. BHASKARAN			Male	Female	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day	Month		Year		
			05	1	2	19	9	4

7/11/14

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details:	

I certify that:

- (a) No student other than my Son/Daughter
(Name) is enjoying the educational aid that has been applied for.
- (b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.
- (c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station:

Podanur

Signature of the Employee:

P. Palani Kumar

Date:

15.11.16

Designation:

R.H.A.L.A.S.I.

Certified that the Particulars given against columns 1 to 7 are correct.

Station:

Signature of the Immediate Supervisor:

Date:

Designation:

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station

Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that R. BHASKARAN (Student's name) is a
bonafide student of this institution KARPAGAM UNIVERSITY (Name of
the institution) and is studying in CIVIL ENGINEERING (name of the Course)
(discipline) (I / II / III / IV / V Year (year in which studying) during the academic
year 2014 - 2017

Station: COIMBATORE

Date: 17/11/2016

REGISTRAR

Karpagam University

Pollachi Main Road, Pachanari Post,

Coimbatore - 641 021.

Seal of College/Institution



Signature of the Head of the Institution with seal

A. M. S.

ok
16/11/16
17/11/16

17/11/16



Rs. 7,000

Received

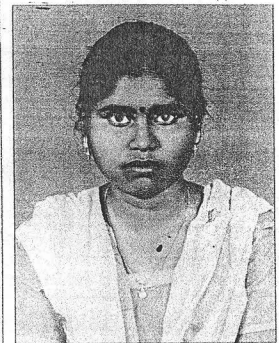
P. Palani Kumar

19/11/2016

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)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	S. IRUDAYARAJ						
2	Designation/Office/Division/Unit	:	SR-TECHNICIAN / RWM / SRTWS / PTJ						
3 (a)	PF Number	:	038 36782						
(b)	Staff/Ticket Number	:	2471						
4	Bill Unit No.	:	05511.						
5	Station/Bill Preparing Office	:	RWM / SRTWS / PTJ.						
6	Pay Band & Grade Pay	:	Pay Band Rs.				Grade Pay Rs.		
			9300-34800				4200/-		
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	
			I. ROSELINE JENIFER					✓	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day		Month		Year		
			1	3	0	6	1	9	99

7/11/10

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details:	

I certify that:

(a) No student other than my Son/Daughter I. ROSELINE JENIFER 16MBU052 (Name) is enjoying the educational aid that has been applied for.

(b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.

(c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: P73 Signature of the Employee: [Signature]
Date: 15-11-2016 Designation: SP. TECHNICAL/CLM/SP7/P73

Certified that the Particulars given against columns 1 to 7 are correct.

Station: P73 Signature of the Immediate Supervisor: [Signature]
Date: 15-11-2016 Designation: SENIOR SECTION ENGINEER
MECHANICAL MILL WORK SHOP
S&T WORK SHOP & E&E

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station

Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that I. ROSELINE JENIFER (Student's name) is a bonafide student of this institution KARPAGAM UNIVERSITY (Name of the institution) and is studying in B.Sc. MICROBIOLOGY (name of the Course) (discipline) (I / II / III / IV / V Year (year in which studying) during the academic year 2016-17.

Station: COIMBATORE

Date: 16.11.2016

Seal of College/Institution



Signature of the Head of the Institution with seal

[Signature]
REGISTRAR
Karpagam University
Pollachi Main Road, Eechanari Post
Coimbatore - 641 021

[Signature]
16.11.2016

Rs. 5000

Received
I. Roseline Jennifer 19/11/16

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)



Dr. R. S. Srinivasan
Dean of Engineering
Karpagam University
Eacharai (Post) Coimbatore - 641 021

(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	L. Varadhapallai			
2	Designation/Office/Division/Unit	:	SSG / F-AB			
3(a)	PF Number	:	05456290			
(b)	Staff/Ticket Number	:	-			
4	Bill Unit No.	:	T10			
5	Station/Bill Preparing Office	:	Cwm / O / RTJ			
6	Pay Band & Grade Pay	:	Pay Band Rs.		Grade Pay Rs.	
			52300 +		4600 - 56900	
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
			V. Ramesh		✓	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day	Month	Year	
			08	10	1994	

Y. 11/12

10	Residential Address	177/A, Railway Colony Camp area, Podarav CAT-641023									
11	Telephone Numbers (with STD Code)	Railway :									
		Residence:									
		Mobile :		9	8	9	4	4	0	9	654
12	Details of Institution/ Course and Duration of the Course, the ward is now studying:										
	Name of the Institution with Address	Course	Duration of the Course		Date of joining the Course	Indicate the year of study [Tick (✓)]					
			From	To		I	II	III	IV	V	
	Karpagamamko Coimbatore-641023	B.E EEE	2014	2017	July 2014					✓	
13	Fees paid for the current year	Year		Amount Rs.							
		2016-2017		RS 10000/-							
14	Bank Account in the Name of ward is Mandatory if, the ward is a major (Copy of first page of savings Bank Pass Book to be enclosed)										
	Name and Address of the Bank		Savings Bank Account Number								
	State Bank of India, VELLALUR		33385002890.								
			MICR No.				IFSC No.				
			641002069				SBIN0015900				
15	In case of minor joint account with the employee is mandatory (Copy of first page of savings Bank Pass Book to be enclosed)										
	Name and Address of the Bank		Savings Bank Account Number								
			MICR No.				IFSC No.				
16	Amount of Scholarship received during the previous year from CSBF	Year		Amount Rs.							
17	Whether the Scholar referred to above is in receipt of Scholarship or Stipend or Fee concession from any other source? If so, give complete details thereof [Tick (✓) relevant column]	Yes		No							
				✓							

Y.m.h.

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
			✓
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details: NO ✓	

I certify that:

(a) No student other than my Son/Daughter V. Ramesh
(Name) is enjoying the educational aid that has been applied for.

(b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.

(c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: PTS Signature of the Employee: [Signature]
Date: 11/11/16 Designation: SSE / CAP
ST / W / PTS

Certified that the Particulars given against columns 1 to 7 are correct

Station: PTS Signature of the Immediate Supervisor: [Signature]
Date: 12-11-16 Designation: [Signature]

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station:
Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that RAMESH V (Student's name) is a
bonafide student of this institution KARPAGAM UNIVERSITY (Name of
the institution) and is studying in ELECTRICAL & ELECTRONICS ENGINEERING (name of the Course)
IV (discipline) (I / II / III / IV / V Year (year in which studying) during the academic
year 2016 - 2017

Station: COIMBATORE
Date: 17-11-2016

[Signature]
REGISTRAR
Karpagam University
Pollachi Main Road, Echanari Post,
Coimbatore - 641 021



Signature of the Head of the Institution with seal

[Signature]
12/11/16

[Signature]
12/11/16

Rs. 7,000
Received
[Signature]
19/11/16

**C.S.B.F
SCHOLARSHIP**

gistration counter
seats by 10.15 a.m.
the procession enter

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 Childth)

(Maximum 2 Children at a time only)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	S. BALANURUGAN (14RBCE046)			
2	Designation/Office/Division/Unit	:	TECHNICIAN, G. R. I.			
3 (a)	PF Number	:	06012966			
(b)	Staff/Ticket Number	:	57502			
4	Bill Unit No.	:	0609-308			
5	Station/Bill Preparing Office	:	GOC			
6	Pay Band & Grade Pay (VI Pc) Basic Pay & Level (VII Pc)	:	Pay Band Rs. Rs 5200-20200 Rs 33100		Grade Pay Rs. Rs 2800	
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
			B. K. VISHVANATHAN		✓	
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day	Month	Year	
			20	06	1997	

7/11/10

(500)

10	Residential Address	90/1 6th CROSS MOOGANBEGAR NAGAR M.K. KOTTAI, TIRUCHY-11																															
11	Telephone Numbers (with STD Code)	Railway : <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Residence: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Mobile : 8 0 5 6 6 5 6 1 9 1																															
12	Details of Institution/ Course and Duration of the Course, the ward is now studying:																																
	Name of the Institution with Address	Course	Duration of the Course		Date of joining the Course	Indicate the year of study [Tick (✓)]																											
			From	To		I	II	III	IV	V																							
	Karpagam University Pollachi Main Road. C.B.E-21	B.E	2014	2018	20-7-14			✓																									
13	Fees paid for the current year	Year		Amount Rs.																													
				TUITION FEES 1,10,000/- HOSTEL FEES 25,000/-																													
14	Bank Account in the Name of ward is Mandatory if, the ward is a major (Copy of first page of savings Bank Pass Book to be enclosed)																																
	Name and Address of the Bank	Savings Bank Account Number																															
	STATE BANK OF INDIA M.K. KOTTAI, TIRUCHY-2. BRANCH.	20323098160																															
		MICR No.				IFSC No.																											
		620002054				SBIN 0018288																											
15	In case of minor joint account with the employee is mandatory (Copy of first page of savings Bank Pass Book to be enclosed)																																
	Name and Address of the Bank	Savings Bank Account Number																															
		-																															
		MICR No.				IFSC No.																											
		-				-																											
16	Amount of Scholarship received during the previous year from CSBF	Year		Amount Rs.																													
		2014		3000/-																													
17	Whether the Scholar referred to above is in receipt of Scholarship or Stipend or Fee concession from any other source? If so, give complete details thereof [Tick (✓) relevant column]	Yes		No																													
				✓																													

X

18	Has He/She applied for any other Scholarship under SBF for the current year? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No
			✓
19	Is any other child getting Scholarship from SBF? Give Details.	Yes/No [Tick (✓)] Details:	

I certify that:

(a) No student other than my Son/Daughter B. K. VISHVANATHAN (Name) is enjoying the educational aid that has been applied for.

(b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.

(c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: Goldanrock
Date: 20-11-16

Signature of the Employee: [Signature]
Designation: Technicalian Grade - 2

Certified that the Particulars given against columns 1 to 7 are correct.

Station: Signature of the Immediate Supervisor:
Date: Designation:

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

Station:
Date:

Signature and Designation of the
Controlling Officer

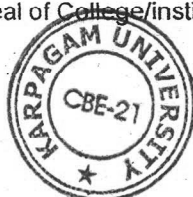
CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that B. K. VISHVANATHAN (14 RBCE041) (Student's name) is a bonafide student of this institution KARPAGAM UNIVERSITY (Name of the institution) and is studying in BE - COMPUTER SCIENCE (name of the Course) (discipline) (I / II / III / IV / V Year (year in which studying) during the academic year 2016 - 2017

Station: COIMBATORE
Date: 23-11-2016

[Signature]
REGISTRAR
Karpagam University
Pollachi Main Road, Eachanari Post
Coimbatore - 641 021

Seal of College/institution



Signature of the Head of the Institution with seal

Received: 23-11-2016

[Signature]
23/11/16
7,000/-

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)



(Photo to be attested by Institution/College Authority)

1	Name of the Employee	:	R. SUGUNA							
2	Designation/Office/Division/Unit	:	TECHNICIAN GI-I / CWM / S&T / WS / PTJ WORKSHOP DIVISION							
3 (a)	PF Number	:	03838055							
(b)	Staff/Ticket Number	:	27558							
4	Bill Unit No.	:	05505							
5	Station/Bill Preparing Office	:	S&T / WS / PTJ							
6	Pay Band & Grade Pay	:	Pay Band Rs.				Grade Pay Rs.			
			Rs 10520/-				Rs 2800/-			
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			
			YUVASRI, R			-	✓			
9	Date of Birth of Son/Daughter for whom Scholarship is applied	:	Day		Month		Year			
			2	6	0	5	1	9	9	4

12/16

4/1/16

10	Residential Address	67B MEHUTHOTAM Gandhinagar podanur, Coimbatore - 23									
11	Telephone Numbers (with STD Code)	Railway :									
		Residence:									
		Mobile :	9	7	9	0	2	2	4	6	09
12	Details of Institution/ Course and Duration of the Course, the ward is now studying:										
	Name of the Institution with Address	Course	Duration of the Course		Date of joining the Course	Indicate the year of study [Tick (✓)]					
			From	To		I	II	III	IV	V	
	KARPAGIAM UNIVERSITY Eachnavi	M.Sc (Computer Science)	2015	2017			✓				
13	Fees paid for the current year	Year	Amount Rs.								
		2016	15,000 /-								
14	Bank Account in the Name of ward is Mandatory if, the ward is a major (Copy of first page of savings Bank Pass Book to be enclosed)										
	Name and Address of the Bank	Savings Bank Account Number									
	State bank of India, Lakshmi illam, podanur Coimbatore - 641023	10658956554									
		MICR No.	IFSC No.								
		641002014	SBIN0005795								
15	In case of minor joint account with the employee is mandatory (Copy of first page of savings Bank Pass Book to be enclosed)										
	Name and Address of the Bank	Savings Bank Account Number									
		MICR No.	IFSC No.								
16	Amount of Scholarship received during the previous year from CSBF	Year	Amount Rs.								
		2016	6000								
17	Whether the Scholar referred to above is in receipt of Scholarship or Stipend or Fee concession from any other source? If so, give complete details thereof [Tick (✓) relevant column]	Yes	No								
		-	-								

Y. M. H.

	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.	Yes/No [Tick (✓)] Details:	

I certify that:

(a) No student other than my Son/Daughter
(Name) is enjoying the educational aid that has been applied for.

(b) Particulars shown regarding my sons/daughters are as furnished by me in pass declaration.

(c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rules.

Station: Podanur Signature of the Employee:
Date: 1.12.16 Designation: TECHNICIAN Gr-I

Certified that the Particulars given against columns 1 to 7 are correct.

Station: Signature of the Immediate Supervisor:
Date: Designation:

CERTIFICATE BY DEPARTMENT

The particulars furnished against columns to 1 to 7 above have been checked and found correct.

Forwarded to the Chairman, Central Staff Benefit Fund Committee, General Manager's Office, Chennai - 600 003 for consideration.

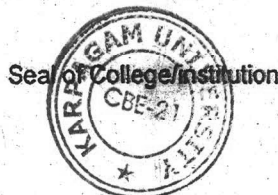
Station:
Date:

Signature and Designation of the
Controlling Officer

CERTIFICATE BY THE EDUCATIONAL INSTITUTION/COLLEGE/UNIVERSITY

Certified that YUVASRI R. (15.CSP.016) (Student's name) is a
bonafide student of this institution KARPAGAM UNIVERSITY (Name of
the institution) and is studying in II M.SC COMPUTER SCIENCE (name of the Course)
II (discipline) (# / II / III / IV / V Year (year in which studying) during the academic
year 2016

Station: Podanur
Date: 01.12.16



REGISTRAR
Karpagam University
Pollachi Main Road, Bachanari Post.
Podanur - 641 021

Signature of the Head of the Institution with seal

ok
17/12/16

01/12/16

Rs 6000/-

Received by
YUVASRI R.
11/12/16