

# CENTRAL UNIVERSITY OF SOUTH BIHAR

## APPLICATION FORM FOR MERIT SCHOLARSHIP TO CUCET/CUSBET/SEMESTER TOPPERS

Name:			Enrollment Number:			Programme & Session:					
Dept./Centre:			Category(Gen/OBC/SC/ST):			Divyang:					
Any Financial Assistance/Scholarship Availed/Availing: (if yes, provide the details):											
Claim/Exam Details : CUCET/CUSBET/ Semester for which claim as Topper is being made ;											
CUCET/CUSBET/ Semester Exam	Merit List	Sem 1	Sem 2	Sem 3	Sem 4	Sem 5	Sem 6	Sem 7	Sem 8	Sem 9	Sem 10
Rank/GPA											
Father's Name:			Present Address:								
Contact No:			Email:								
<b><u>Claimant Aadhar linked Bank details:</u></b>											
Account Holder:						A/c No-					
Bank & Branch:						IFSC & MICR:					
<i>Certified that the above information is true to my knowledge based on available facts and evidences. If any information provided by me in this claim form is subsequently found incorrect/false, I would refund the entire amount received by me.</i>											
Date:						Signature of the Claimant					
Recommendation of Dean/ HOD/In-Charge											
Signature with Seal											
<b><u>FOR OFFICE USE ONLY (ACADEMIC SECTION)</u></b>											
<b><u>Relevant Monthly Attendance Records as per the claim</u></b>											
Name of the Month											
Attendance (%)											
Remarks, if any:											
Prepared & Checked By:						Verified By:					
Signature with Date :-						Signature with Date :-					
Full Name :-						Full Name :-					
Designation:-						Designation:-					
<b>Topper for the CUCET/Semester.....Session.....Program.....Rank/GPA:.....</b>											
Checked By(Sign with date):						Verified By(Sign with date):					
Name& Designation:						Name & Designation:					
To, Dy. Registrar (Dev)/ Asst. Registrar (Dev).											