

Application No:
Date & Time :
(Official Purpose)

Application for the Postgraduate Scholarships

MINISTRY OF EDUCATION

Name of the Scholarships programme: Indian Maulana Azad Scholarships scheme- 2021-2022

Country :India

Code: INDMAZD2021

(To be filled with BLOCK Letters)

1. Personnel Details:

1.1. Name with initials

1.2. Name in full: Rev./Mr./Ms.

1.3. Date of Birth

Date Month Year

1.4. Age

1.5. Gender

Male Female (Write mark “√” in the relevant

category)

1.6. Whether Married/Single/Widowed

1.7. National Identity Card No

2. Contact Detail:

2.1. Address

2.2. Residential District:

2.3. Telephone No. Residential

Mobile

2.4. E Mail Address:

3. Academic / Professional / Technical qualifications :

Name of examination/ certificates	Year & month	Institutions	Main Subjects	Class & GPA

4. Present Employment: Government Semi Government Private

4.1. Employment Record

Name of the Institution	Department	Designation	From	To

4.2 Are you holding a permanent appointment?.....

4.3. If Permanent, have you been confirmed in the appointment?.....

4.4. If confirmed, the date of the confirmation.....

5. Particulars of research and publications if any;.....
.....

6. Highest Examination passed for English Language

Exam/Course (IELTS, TOFFL, AL/L,OL Diploma (more than 6 months)

Exam	Year	Grade or Marks

7. Desired Courses of Study

2

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8. Have you ever been nominated for a scholarship by the Ministry of Higher Education?

Yes/No

If Yes;

i. Scholarship Programme

ii. Year

9. Any other particulars :

I hereby certify that the particulars furnished by me in this application are true and accurate, and that I have not suppressed any essential information. I am also aware that if any particulars contained herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before selection and withdrawal/cancel of the award if discovered after selection.

Date :

Signature:

10. Certificate of the Head of the Institution [only for permanent employees from Government/ University/ State Corporation sector]

(i) I certify that ;

(a) The training provided under this scholarship is essential / not essential for this institution.

(b) Details declared by the applicant in **cages 3, 4** of the application were verified by me with the personal record of the officer and are *correct / should be corrected as indicated here.

(c) The applicant has been confirmed in the post (Yes / No)

If No, Please give reasons

.....

(d) The applicant *will/ will not be released to take up this scholarship if selected.

(ii) Full name of the applicant :

(iii) Any other special reason/ reasons :

.....
Name of the Institution :

.....
Date

.....
Signature of Head of the Institution
with the official frank

* Delete words inapplicable.(this section should be signed personally by the Head of the Institution)