



Educational & Charitable Trust (Regd.)

R. K. M. EDUCATIONAL & CHARITABLE TRUST

PRERNA DHAM, SECTOR - 15, FARIDABAD, PHONE : 263249

APPLICATION FORM FOR ASSISTANCE FROM THE TRUST

1. Name of Applicant
(Block Letters) _____
2. Father's Name &
Address _____
3. School & College _____
4. Date of Birth
(In Christian era) _____
5. Occupation of Father
(or Guardian, if father
deceased) _____
6. Monthly Income of
Father / Guardian _____
7. Monthly income of
Mother (if earning) _____
8. Number of dependents
(Non-earning)
(Note : Please attach income certificate) _____
9. Permanent Address
of Father / Guardian _____
10. Percentage marks in the last two Annual Exams :-

Class / Examination	School / College	Year	Percentage Marks	Remarks
a) _____	_____	_____	_____	_____
b) _____	_____	_____	_____	_____
11. Merit / Distinction
obtained (if any)
Give details _____
12. Type of Assistance Required :
 - a) Stipend _____
 - b) Subsidy for books _____
 - c) Subsidy for Uniform _____
 - d) Subsidy for Examination Fee _____
13. Whether the applicant availed any assistance earlier from R.K.M. Trust by way of Stipend / Subsidy, if so, give details.
Add any other information to justify the aid _____

Date _____

Signature of Applicant

Certified that (i) the information given above is correct.

(ii) the applicant deserves consideration for the following reasons :

Date _____

Signature of the Head of the Institution
Recommending Authority
(Office Stamp)