

APPLICATION FOR GRANT OF MERIT SCHOLARSHIP OUT OF CRPF EDUCATION FUND FOR THE  
ACADEMIC SESSION 20.....20.....

- 1 Force No. :
- 2 Rank :
- 3 Name :
- 4 Range/Unit :
- 5 a) Name of the ward and DOB :  
(Use separate form for separate ward)  
b) Brief details of 2<sup>nd</sup> eligible ward for :  
which application has been preferred  
separately(Name, DOB, Class & category)  
**Note:** Information at 5(b) is only for use :  
of Range Hqr to cross verify and ensure  
that the application in r/o two eligible  
ward is submitted.
- 6 Last examination passed with division :  
and percentage obtained in year :  
20.....20..... (Mark Sheet of  
previous year indicating that the ward  
had passed his examination to be  
enclosed).
- 7 Class in which studying during current :  
academic session 20.....20..... for  
which scholarship is applied.
- 8 Duration/Name of course (if the ward is :  
studying in professional/Technical  
Degree/ Diploma courses).  
Separate certificate may also be  
attached.
- 9 Name of Institute/College/School with :  
full address.
- 10 Certificated of school authority to be :  
enclosed indicating whether the ward is  
continuing study or not.
- 11 Remarks :

**Signature of the applicant**

No.....Rank.....

Name.....

Unit.....

**CERTIFICATE BYE THE SCHOOL/INSTITUTION**

- 1 Name of Student (in block letter) :
- 2 Father's name :
- 3 Class passed during last Academic session i.e. 20.....20..... :
- 4 Marks obtained :
- i) Marks allotted :
- ii) Marks obtained :
- iii) Percentage :
- iv) Division :
- 5 Class in which studying during current academic session 20.....20..... :
- (Separate certificate showing degree/course(in full form), duration of course/degree, years etc in case of ward studying/pursuing under technical category- "A"& "B" may be attached)
- 6 Whether the ward is staying in a recognized hostel, if so, charges paid per annum. Boarding and lodging charges to be shown separately. (separate certificate showing amount and duration may be attached)

It is certified that the above information is correct

Signature.....  
 Name of School/College/Institution  
 (with office stamp/seal)

Place: .....  
 District: .....  
 State: .....  
 Date: .....

**CERTIFICATE BY THE FORCE PERSONNEL**

1. Certified that the particulars furnished by me are correct.
2. Certified that the child for whom scholarship is applied for is not an earning hand.
3. Certified that I will refund the excess or wrong payment of scholarship, if any paid to me.
4. Certified that my wife/husband, if serving in CRPF is not claiming the scholarship for the same ward(s).
5. Certified that I am regular member of Education Fund and subscribing towards the Fund for more than 5 year as on date and also eligible for claiming benefits of the Fund.
6. Certificate from the school is enclosed.
7. Certified that I have applied for another child namely .....  
who is studying in class.....

**Signature of the applicant**

No.....Rank.....  
 Name.....  
 Unit.....

**CERTIFICATE BY THE UNIT COMMANDER**

It is certified that No.....Rank.....Name.....  
 of.....Bn/GCs/Office has completed 5 years of  
 membership to claim the benefits and also subscribing towards the Education  
 Fund regularly. The individual is submitting application for grant of scholarship  
 restricted to one/two eligible child/children’s only.

**Unit Commandant  
Head of office.**

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ACADEMIC SESSION 20.....20.....

- 1 IRLA No. :
- 2 Rank :
- 3 Name :
- 4 Range/Unit :
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(Use separate form for separate ward)  
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which application has been preferred  
separately(Name, DOB, Class & category)  
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Separate certificate may also be  
attached.
- 9 Name of Institute/College/School with :  
full address.
- 10 Certificated of school authority to be :  
enclosed indicating whether the ward is  
continuing study or not.
- 11 Remarks :

**Signature of the applicant**

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Name.....

Unit.....

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- 2 Father's name :
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- i) Marks allotted :
- ii) Marks obtained :
- iii) Percentage :
- iv) Division :
- 5 Class in which studying during current academic session 20.....20..... :
- (Separate certificate showing degree/course(in full form), duration of course/degree, years etc in case of ward studying/pursuing under technical category- "A"& "B" may be attached)
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It is certified that the above information is correct

Signature.....  
Name of School/College/Institution  
(with office stamp/seal)

Place: .....  
District: .....  
State: .....  
Date: .....

**CERTIFICATE BY THE FORCE PERSONNEL**

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