

Application for COVID -19 Relief Scheme

Fill all the details in block letters

1. Student's Information

(Please enter details of student(s) availing the scheme)

S. NO	STUDENT (FULL NAME)	ADMISSION NO	CLASS & SEC

2. Family Information

Father

a. Father's Name: _____

b. Father's Occupation: _____

c. Name of Organization: _____

d. Designation: _____

e. Address (Office): _____

f. Name of Employer (If in Service) : _____

g. Telephone No. of Employer (If in Service) : _____

Mother

a. Mother's Name: _____

b. Mother's Occupation: _____

c. Name of Organization: _____

d. Designation: _____

e. Address (Office): _____

f. Name of Employer (If in Service) : _____

g. Telephone No. of Employer (If in Service) : _____

3. Educational Indicators :

a. Percentage obtained in the previous academic year (of all the siblings)

(Attach copy of Mark Sheet)

S. NO	STUDENT (FULL NAME)	PERCENTAGE	MARK SHEET ATTACHED (YES/ NO)

b. Other Certificates and Achievements: (With student's name clearly mentioned)

I _____

II _____

III _____

(Attach copies of certificates)

4. Financial Information

a. Whether the student is getting subsidy/ scholarship/ financial assistance from any other institution/ state or central government (YES/ NO) _____

If yes, copies of documents to be submitted / attached

i. Name of the Granting institute : _____

ii. Address of the Granting institute : _____

iii. Amount Granted: _____

b. If the parents are getting reimbursement of tuition fee or financial assistance fully or partly from their employer, furnish the details of the same.

I _____

II _____

- c. Reasoning in specific for the inability of parents to pay the fees citing the details or source of funding for the education so far and the effect of the COVID-19 on such sources of income :

5. Document enclosed with the application

Mandatory Documents :	Enclosed Document (Put a tick mark in case of yes)
1. Income Declaration – affidavit (format B) on non judicial stamp paper of Rs. 50 (Rupees fifty) by parents	
2. Schedule (Format C- details of income and assets) duly signed by parents with relevant proofs	
Copy of the following Documents(if applicable):-	Enclosed Document (Put a tick mark in case of yes)
For Salaried Parents:	
a. Income Tax Returns for the Previous Three Years	
b. Form 16 for Financial Year 2019-20	
c. Form 26 AS for Financial Year 2019-20	
d. All Vehides’ Registration Copies including the related Bank Loan Statements (if any)	
e. Bank Statement for the last 12 months for all account mentioned in schedule (Format C)	
f. Salary Statement for all ensuring months for which financial help is sought	
For Parents engaged in some Business:	
a. Income Tax Returns FOT THE Previous Three Years(personal as well as Business)	
b. Balance Sheet and Profit & Loss Statement for the Financial Year ended 2018-19	
c. Form 26 AS for Financial Year 2019-20	
d. GST Return For Financial Year 2019-20	
e. All Vehides’ Registration Copies including related Bank Loan Statements (if any)	
f. Bank Statement for the last 12 months for all account mentioned in schedule (Format C)	

FORMAT OF AFFIDAVIT FOR DECLARING INCOME

(on Rs. 50/- non judicial stamp paper)

To be signed in the presence of Notary Public or a Magistrate / 1st Class Magistrate Executive/ revenue officer who would also affix his signature and seal.

Declaration of Income of Parents for the year ending on 31st March, 2020 for the purpose of COVID-19 Relief Scheme

I, _____ (mother's name) daughter of Shri/Smt _____

presently residing at _____;

and

I, _____ (Father's name) son of Shri/Smt _____

_____ presently residing at _____; solemnly

affirm and say as follow:

1. That our son/ daughter _____ (Name of Student) has been studying in _____ (Class) of.....
2. That our annual family income from all sources in the preceding year ending 31st March 2020 has been Rs _____ as per details furnished in the schedule (Format C) under the name written and no income has been concealed. We also affirm that particulars of all assets (like Vehicles, Bank Accounts etc) held by us are as shown in the schedule and no asset has been concealed. We make ourselves personally responsible for the accuracy of the facts and figures furnished.
3. That we further undertake that in the event of the particular given in this declaration being found false or breach of any of the term and conditions of COVID-19 Relief Scheme we shall be liable to refund the amount of the financial assistance awarded to our ward. The school's decision on whether the declaration of particular is false and /or there has been breach, shall be final and binding on us and also render us liable for any penalty imposed **by the school** in addition to prosecution under the prevailing laws.

Signature of Mother:

Signature of Father/ Guardian:

Name of Mother:

Name of Father/ guardian:

Date:

Place:

6. Declaration by the both parents/ guardian:

- a. We do not avail any other financial assistance for this purpose from any other sources. If we apply for any other financial assistance and get it, we undertake to refund the amount of financial assistance received from the school.
- b. We shall abide by the terms and conditions of COVID-19 Relief Scheme.
- c. Our ward has attended classes regularly and has had no attendance shortage.
- d. We undertake that if at any state, it is found (to the satisfaction of the sanctioning authority) that the information given by us is false or if we violate the terms and conditions of the scheme, the financial assistance to our ward, may be cancelled and the amount thereon will be refunded by us or recovered from us, Apart from this we may be also liable for such penal action as decided by **the school** in addition to prosecution as warranted by law.
- e. We understand that mere submission of documents will not entitle our ward for financial assistance. The sanction will be based on the establishment of income status through submission of all necessary documents, fulfilment of all conditions to the complete satisfaction of the competent authority
- f. We undertake that we will clear all the dues of the session as early as possible.
- g. We hereby declare that all the information given above in this application form is correct.

Signature of Mother:

Signature of Father/ guardian:

Name of Mother:

Name of Father/ guardian:

Date:

Place:

Note: This Form, if not filled in all respect or any column left blank will be liable for rejection. If any column is not applicable to the applicant in the provide space mention "Not Applicable".

SCHEDULE TO BE ATTACHED WITH AFFIDAVIT OF INCOME

I. Details of Income from salary

	Father	Mother
Annual Gross Salary* income in the Financial Year 2019-2020		

*Gross Salary Includes Basic Pay + Dearness Allowance + House Rent Allowance+ Travelling Allowance+ Bonus + Incentives+ Any other Allowance) + Pension without Deduction of Income Tax

II. Details of Income from Business/ Profession/ Self Employment

	Father	Mother
Nature :		
Year of Establishment :		
Turnover for the Financial Year 2019-20		
Income for the Financial Year 2019-20		

Attach separate sheets in case of more than one Business/ Profession/ Self employment

III. Details of Property Income

	Father	Mother
Annual Rental income From Residential Properties in the Financial Year 2019-2020:		
Annual Rental income From Commercial Properties in the Financial Year 2019-2020:		

IV. Details of Agricultural Income

	Father	Mother
Annual Income From Agriculture in the Financial Year 2019-2020:		

V. Details of Income from Other Sources

	Father	Mother
Annual Income from Other Sources in the Financial Year 2019-2020:		

VI. Details of Bank Account of Both Parents

Name (as in the Bank Account)	Bank Name	Branch	IFSC Code	Account Number	Type of Bank Account (SB/CA)

VII. Details of Vehicles Owned by Both Parents

Type of Vehicle	Owned	No. Of Vehicles
Two Wheeler	Yes/No	
Four Wheeler	Yes/No	
Other Vehicle (if any)	Yes/No	

VIII. Comparative Projected Income (2019-20 Vs 2020-21)

Sources of Income	Annual Income for the Financial Year 2019-20 (Must Match with details given above and other records attached with Format A)	Projected Income for the Financial Year 2020-21
Salary		
Business/ Self Employment		
Agriculture		
Other Sources		

I undertake that I will clear all the dues of the session as early as possible

Signature of Mother:

Signature of Father/ Guardian:

Name of Mother:

Name of Father/ Guardian:

Date:

Place: