



SHRI VISHWAKARMA SKILL UNIVERSITY

(State University enacted under the Government of Haryana Act 25, 2016)

Ref. No. SVSU/2024/R&S/001

Date: 31.01.2024

Circular

In continuation of Circular Ref.No.SVSU/2023/R&S/061, all the students are hereby informed that the last date to apply for the scholarship is 2nd February 2024. The duly filled applications are to be submitted at ADD Office, 3rd Floor, Takshashila Bhawan, after verification from their department, by 8th February 2024.

For more details kindly, contact the SIF (Skill Innovation Foundation) Department.

Enclosed: Application Form & Consent Form.


21/01/2024
Assistant Registrar (R&S)

Copy to:

1. OSD to VC
2. PA to Registrar
3. Deans of all Skill Faculties
4. Dean of Academic Affairs
5. CEO, SIF
6. University Website
7. Notice Board



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APPLICATION FORM FOR SCHOLARSHIP SCHEME

Endorsement No. (To be allocated by the Department office): _____ Date: _____

University Registration Number: _____

Name: _____

Father's Name: _____

Contact No.: _____

Email ID: _____

D.O.B: _____

Skill Faculty & Program Name: _____

Semester: _____

Candidate image must
be verified by
Department

Candidate's Bank Account detail:

Account Holder Name: _____ IFSC code: _____

Account Number: _____ Branch Name: _____

For candidates of 1st Year (Filled and duly verified by the Officials):

JEE Main Rank (for B.Tech candidate only): _____ Marks in Diploma Examination: _____

Marks in 12th Examination: _____ Marks in 10th Examination: _____

Any other Examination: _____

Candidate's category: _____

(GEN/EWS/BPL/PWD/ Other)

(Candidate's Signature)

Other than 1st Year candidate Performance Tracker (Filled and duly verified by the Officials):

Year	% marks secured	Overall Academic Performance	Annual Income	Head of Department/ Chairperson verification signature
1 st				
2 nd				
3 rd				
4 th				

*(A self attest Aadhar, Income Certificate (issued by ADC-cum-DCIRO), Family ID (PPP), Qualification Certificates, Consent Form at Annex.-1, Bank passbook photocopy and an application written by the candidate should be attached with this form. This form must be verified and duly signed by the concerned department Head/Chairperson.)



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Annex.- I

Consent Form

Date: _____

To

The Dean

Respected Sir,

I, _____, am a student of _____ course under the _____ department, and I have applied for the scholarship offered by the Shri Vishwakarma Skill University. I hereby declare that I am not receiving any Internship, stipend, scholarship, financial support, grant etc. from any state or central government programmes or schemes.

I understand that if I am found to be receiving such benefits from any state or central government programs or schemes, my scholarship from Shri Vishwakarma Skill University will be canceled, and I will be liable to repay the amount already paid. Additionally, further disciplinary/legal action may be initiated against me.

I hereby give my consent to Shri Vishwakarma Skill University to verify my declaration and take necessary action if found otherwise.

Thank you.

Yours' sincerely,

Candidate Name: _____

University Registration No.: _____

Candidate Signature: _____