

Application form for Reimbursement of State Transport Facilities/ Train Pass to SC Students

Year 2017-18 (1st Installment i.e. from July/ Aug, 2017 to Dec 2017/ Jan 2018)

(The candidates are advised to submit their application to the Principal concerned of their institution also not later than last date of submission)

Registration No. _____
(for office use only)

- Shri/ Shrimati/Kumari

[illegible]

- [illegible]

- If yes, caste:

[illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- [illegible]

- Yes ☐ No. ☐

- | Distance | | | Amount for Six Months Pass (Rs.) | Time period | | State Transport Pass | Train Pass |
|----------|----|-----------|----------------------------------|-------------|----|----------------------|------------|
| From | To | Kilometer | | From | To | | |
| | | | | | | | |

Date: _____

Place: _____

(a) Signature of applicant

(b) Signature of Parents/Guardian

PART- B

(To be filled by the Head of Institution)

Certified that:

- (i) Information given by the applicant in Part- A has been checked and found correct.
 - (ii) The course in which the applicant is studying in this Institution is a Post Matric one.
 - (iii) The Institute is affiliated to _____ University/ Board and is recognized by the Government of India/ State Government, Haryana that applicant is studying _____ course in this Institution and the minimum qualification required for admission to that course is pass in the _____ examination.
 - (iv) It is certified that the student is a bonafied student of this institution and not residing in the campus hostel. The charges claimed by the students is as per scheme of state transport facility/train pass.
 - (v) Certified that the benefit holder named above has been regular in attendance and has been confirmed to the rules under which benefit is granted.
- It is also certified that the eligibility of the student has been rechecked and found correct.

Signature of the Head of Institution

Dated _____

Name in capital letters _____

Designation _____

Address _____

(Seal of the Institution)

Check list of Document attached:

- i. Scheduled Caste Certificate _____
- ii. Attested copies of marks sheet/ certificate _____
- iii. Attested Copy of Ration Card & Aadhaar Card
/Enrolment No. _____
- iv. Attested Copy of Domicile Certificate _____
- v. Copy of receipt of Bus/Train Pass charges _____