

SHRI J. H. V. S. JAIN CHARITABLE TRUST

(Trust Registration No : E – 11447)

R. K. Building No. 4, Ground Floor Room No. 7, Khetwadi Lane No. 8, Mumbai – 400 004. Tel. : 2380 34 48

APPLICATION FOR EDUCATION ASSISTANCE

(To be filled in **CAPITAL** Letters only)

Date : _____

For Office Use Only	Application No : _____
	Remarks : _____

The Trustees
Shri J. H. V. S. Jain Charitable Trust,
Mumbai,

Dear Sir,

Kindly affix the latest
Photograph of the
Applicant Student
Here
(Do not staple)

Sub : Higher Education Assistance - Loan

We hereby request you to grant higher education assistance - loan as per your norms and oblige.

Our details are as under

➤ PERSONAL DETAILS

1. Student Information

Name : _____
(Title) (First Name) (Father Name) (Surname)

Birth Details : _____ / _____ / _____
(Date : D D) (Month : M M M M M M M M M M M M) (Year : Y Y Y Y)

Contact Details : **(M)** : _____ **E-Mail** : _____

Present Address : _____

2. Parent / Guardian Information

Name : _____
(Title) (First Name) (Father / Husband Name) (Surname)

Occupation : _____
(Specify with details : Business / Professional / Service etc.)

Annual Income : Rs _____ **PAN No** : _____

Family Assistance : Rs _____ **Per Annum for Education Expense**

Address : _____

Contact Details : **(M)** : _____ **(R)** : _____

Native Place : _____ **District / State** : _____

3. Details of Education Assistance outstanding by any other family members

Student Name : _____ **Relation with Applicant** Brother Sister

➤ **EDUCATION / CAREER ACHIEVEMENTS**

Examination / Course Passed / Cleared	Passing Details Month & Year	Marks / Grade			Institute / University Name from where passed
		Secured	Out of	%	
X Std or Equivalent					
XI Std or Equivalent					
XII Std or Equivalent					

(Submit copies of the Marks Sheet for the Examinations / Course / Special Exams like CET etc. cleared till date)

➤ **PROPOSED / COMMITTED – HIGHER EDUCATION STUDY DETAILS**

Course : _____
(Submit relevant Admission Letter or equivalent evidence)

Duration : _____ **Years - Starts** : _____ **Ends** : _____
(Month & Year) (Month & Year)

Institute Name : _____

Institute Address : _____

Affiliated to University : _____

➤ **PROPOSED / COMMITTED - EDUCATION EXPENSE DETAILS**

Sr	Expense Details		Amount		
	Date	Against / Head	Payable	Arranged	Shortfall
1					
2					
3					
4					
5					
6					
	Total				

(Submit relevant Institute - Course Brochure / Literature with Expense & Payment Schedule)

➤ **DETAILS OF ARRANGED – FINANCE / ASSISTANCE**

Sr	Revenue Details		Amount		
	Head	Organization Name	Applied	Sanctioned	Disbursed
1	Self	Own Resources / Family / Relatives etc.			
2	Bank				
3	Institute				
4	Institute				
5					
6					
	Total				

(Submit copies of relevant sanction letter & disbursement schedule)

➤ **TWO REFERENCE (From Jain Community not related to the student)**

Details of 1st Referral

Name : _____
(Title) (First Name) (Father / Husband Name) (Surname)

Address : _____

Contact Details : (M) : _____ (R) : _____

Details of 2nd Referral

Name : _____
(Title) (First Name) (Father / Husband Name) (Surname)

Address : _____

Contact Details : (M) : _____ (R) : _____

❖ **Self Attested Documents Submitted Herewith (Tick Appropriately)**

For Applicant Student

- Ration Card
 PAN Card
 Latest Paid Fee Receipt

For Parent / Guardian

- Latest Residence - Rent / Maintenance Receipt
 PAN Card
 Latest Residence - Electricity / Telephone Bill

We hereby the student & parent / guardian confirm have read the terms & conditions (printed on the last page) of **SHRI J. H. V. S. JAIN CHARITABLE TRUST** and agree to abide by the same & further promise to furnish any details / information as & when called for and bring all original documents submitted at the time of interview.

(Signature of Student) (Signature of Parent / Guardian)
(Full Name : _____) (Full Name : _____)

(In case of guardian specify relationship with the applicant student _____)

(Note : All information sought is mandatory and incomplete application may get rejected)

For Office Use Only

Application considered in Trust meeting held on _____ & recommended for sanctioned of loan to Bank _____ Branch _____ who have granted loan of Rs _____ at Interest _____ p.a. with _____ EMI of Rs _____ Beginning From _____ & ending on _____ as per their sanction letter No : _____ Dated _____ with Trust agreeing giving its Fixed Deposit of Rs _____ under lien to the said bank

(Date)

(Authorised Signatory)

(Authorised Signatory)

SHRI J. H. V. S. JAIN CHARITABLE TRUST

Terms & Conditions for Higher Education Assistance Scheme

- 1 The student should be minimum H.S.C. Passed / Graduate or equivalent from any recognized Indian University.**
- 2 The student must have secured minimum 60 % marks or equivalent score / grade in all the Board / College / University Examinations.**
- 3 Application must be made in the prescribed form alongwith requested submissions**
- 4 The student must have secured admission in a recognized institute for higher education study for which assistance is being sought.**
- 5 The student shall have to produce a certificate of good health & fitness from recognized medical practitioners / doctors.**
- 6 The student should quote the Application Number allotted in all subsequent correspondences.**
- 7 In the event of the sanction of the loan, the student will submit education progress reports / marks sheet every six months till the completion of the course / study.**
- 8 The student should intimate in writing the changes if any in the postal address / contact details viz. mobile number, landline number, e-mail id etc. whenever it occurs**
- 9 Trustees reserve the rights to decide the quantum of financial assistance or reject the application without giving reasons.**
- 10 Trustees reserve the rights to change rules & regulations in this regard, if necessary, as & when required.**
- 11 The student undertakes to submit the copy of the final education / course completion certificate on receipt of the same.**
- 12 The student shall submit the job / employment appointment letter as soon as it materializes.**
- 13 Education Assistance amount would be repaid as per the sanction letter terms on the scheduled dates.**

(Signature of Student)

(Signature of Parent / Guardian)

(Full Name : _____) (Full Name : _____)

(In case of guardian specify relationship with the applicant student _____)