



Jain Shwetambar Terapanthi Mahasabha,
3, Porchugeej Church Street, Kolkatta - 700001

Medhavi Chhatra Protsahan Pariyojna

Application Form

Year:.....

Please paste
passport size
photograph

For Office Use

Code No.

Receipt No:Dated

Accepted / Rejected (with reason):

.....

Certificate Checked By Approved By

1. Name of Student :

2. Father's Name:

3. Date of Birth :

4. Permanent Address:

.....

.....Pin Code

5. Tel. No: STD Code E-mail:

Phone No.(Residence): Phone No.(Office).....

Student's Mobile No: Father's Mobile No:

6. Last Exam. passed :

7. Name of Board : 9A. State

8. Percentage of marks (Aggregate) :

9. Are you interested apply for Scholarship (Yes / No):
(If yes, please enclosed the Scholarship form duly filled)

10. Future Education Planning:.....

11. Where applied for Higher Education / Details :

12. Hobbies :

13. Ambition after education :

14. Extra Special Activities :

(During last 2 years First, Second & Third position) :

15. Father's Occupation :

Place : Student's Signature:

Date: Father's Signature:

Conditions of application form:-

1. Student who has passed Secondary Board (Class X) and Higher Secondary Board (Class XII) or its equivalent and secured 85% marks from year 2006 are eligible to apply.
2. Apply on prescribed form only and forms are available at local Terapanthi Sabha and website: www.terapanthinfo.com
3. Please fill column No. 1 to 15 with correct and clear information. Please do not leave any column blank, application liable to be rejected in case of vacant column.
4. Please enclose necessary document for the verification information wherever necessary.

Essential Enclosures:-

1. Copy of Mark Sheet attested.
2. Attested copy of Rank Letter or Board / State Level.
3. Extra Curricular Activity on All India / State Level, regarding column 14.

Submit the Form:-

1. Please submit the application form with enclosures by Courier / Registered post before 30th June of every year.
2. Form sent after the last date will not be accepted.
3. Please submit your application form at the address: -

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