

**Application No:**  
**Date & Time :**  
(Official Purpose)

**Application for the Postgraduate Scholarships**

**MINISTRY OF EDUCATION**

*Name of the Scholarships programme: Indian Maulana Azad Scholarships scheme- 2021-2022*

*Country :India*

*Code: INDMAZD2021*

(To be filled with BLOCK Letters)

**1. Personnel Details:**

**1.1. Name with initials**

**1.2. Name in full: Rev./Mr./Ms.**

**1.3. Date of Birth**

Date  Month  Year

**1.4. Age**

**1.5. Gender**

Male  Female (Write mark “√” in the relevant

category)

**1.6. Whether Married/Single/Widowed**

**1.7. National Identity Card No**

**2. Contact Detail:**

**2.1. Address**

**2.2. Residential District:**

**2.3. Telephone No. Residential**

Mobile

**2.4. E Mail Address:**

**3. Academic / Professional / Technical qualifications :**

Name of examination/ certificates	Year & month	Institutions	Main Subjects	Class & GPA

4. Present Employment: Government  Semi Government  Private

**4.1. Employment Record**

Name of the Institution	Department	Designation	From	To

4.2 Are you holding a permanent appointment?.....

4.3. If Permanent, have you been confirmed in the appointment?.....

4.4. If confirmed, the date of the confirmation.....

5. Particulars of research and publications if any;.....  
.....

6. Highest Examination passed for English Language

Exam/Course (IELTS, TOFFL, AL/L,OL Diploma (more than 6 months)

Exam	Year	Grade or Marks

7. Desired Courses of Study

2

3

8. Have you ever been nominated for a scholarship by the Ministry of Higher Education?

Yes/No

If Yes;

i. Scholarship Programme

ii. Year

9. Any other particulars : .....  
.....

I hereby certify that the particulars furnished by me in this application are true and accurate, and that I have not suppressed any essential information. I am also aware that if any particulars contained herein are found to be false or incorrect, I am liable to disqualification if the inaccuracy is discovered before selection and withdrawal/cancel of the award if discovered after selection.

Date : .....

Signature: .....

10. Certificate of the Head of the Institution [only for permanent employees from Government/ University/ State Corporation sector]

(i) I certify that ;

(a) The training provided under this scholarship is essential / not essential for this institution.

(b) Details declared by the applicant in **cages 3, 4** of the application were verified by me with the personal record of the officer and are \*correct / should be corrected as indicated here.

(c) The applicant has been confirmed in the post ..... (Yes / No )

If No, Please give reasons .....

.....

(d) The applicant \*will/ will not be released to take up this scholarship if selected.

(ii) Full name of the applicant : .....

(iii) Any other special reason/ reasons : .....

.....

Name of the Institution : .....

.....  
Date

.....  
Signature of Head of the Institution  
with the official frank

\* Delete words inapplicable.(this section should be signed personally by the Head of the Institution)