



## Dr. P. S. Shankar Prathishthan, Kalaburagi

### Application for Medical Scholarship 2024-25

|  |   |                          |
|--|---|--------------------------|
| 1. First Name:   | Middle Name:  | Last Name:               |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |
| 2. Date Of Birth:  | Gender:   |                          |
| <input type="text"/>   | <input type="checkbox"/> Male <input type="checkbox"/> Female     |                          |
| 3. Father's Name:  | Phone Number:   | Occupation:              |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |
| 4. Family Annual Income in Rs.:  |   |                          |
| <input type="text"/>   |   |                          |
| 5. Religion:   | Category:   | Caste:                   |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |
| 6. Current Address:  |   |                          |
| Home/Apartment Number:   | Area:   | City:                    |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |
| District :   | Pin code:   |                          |
| <input type="text"/>   | <input type="text"/>  |                          |
| 7. Permanent Address:  |   |                          |
| Home/Apartment Number:   | Area:   | City:                    |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |
| District :   | Pin code:   |                          |
| <input type="text"/>   | <input type="text"/>  |                          |
| 8. Course Attending:   | Institute Name:   | CET/NEET Ranking:        |
| <input type="text" value="M.B.B.S"/>   | <input type="text"/>  | <input type="text"/>     |
| Address:   |   | Phone Number:            |
| <input type="text"/>   |   | <input type="text"/>     |
| 9. Previous Education Details:   |   |                          |
| Course Completed:  | Marks Obtained in PCB in %  | College Name and Place : |
| <input type="text" value="PUC"/>   | <input type="text"/>  | <input type="text"/>     |
| 10. Medium of instruction for I <sup>st</sup> standard to X <sup>th</sup> standard : | <input type="checkbox"/> Kannada <input type="checkbox"/> English |                          |
| 11. School Studied [ Name & Place]:  |   |                          |
| <input type="text"/>   |   |                          |
| Name of the college:   | Address:  | College Phone Number:    |
| <input type="text"/>   | <input type="text"/>  | <input type="text"/>     |

**Note:** Please submit in writing about the family income background and conditions of your poverty and hardships in one or two pages enclose with his application.

Place:

Date:

Signature of Applicant