

# Indo-Swiss Training Centre



## Application Form for Stipend

Type of Stipend (Merit / Means) : -----  
Period for which claimed (Entrance /1<sup>st</sup>/2<sup>nd</sup> /3rdYear) : -----  
Name : -----  
Roll. No : -----  
Father's name : -----  
Present Semester / Course : -----  
Year of admission in ISTC : -----  
Rank in Entrance exam : -----

√Total Marks and rank obtained in two semesters for which :  
the stipend is claimed (Attach photocopies of mark sheets)

Semester	Total Marks	Rank
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Total of both semesters : -----

Family income from all sources (Attach income certificate) : -----  
(Applicable for students claiming means based stipend)

I hereby declare as follows:

1. That I have not received any scholarship/ financial assistance from any other source, during the period of claim.
2. That I have passed all the examinations of the claimed semesters in the first attempt.
3. That I have not been punished for any misconduct during the period of claim, and no disciplinary action is pending against me.

(Signature of student with date)

(Counter signature of father/ guardian with date)

Through : Class in charge

Principal

# Indo-Swiss Training Centre



## **AFFIDAVIT (for Means based Stipend only)**

(To be submitted by the Parent/ Guardian on non-judicial stamp paper of ₹ 3/-)

I, ....., S/o / D/o, Sh. ...., resident of  
.....,  
do hereby solemnly affirm and declare as under:

- 1 That the income of my family from all sources is ..... per annum for the financial year.....
- 2 That this affidavit is being submitted for award of stipend to my son/daughter/ward, ..... (name of student), Roll No. ...., who is studying in Indo-Swiss Training Centre, CSIO, Sector 30, Chandigarh.
- 3 That I shall return/refund the concession availed by my son/ daughter/ ward and he/ she becomes liable for further disciplinary action as per rules, in case the information is found to be false at any stage.

Deponent

Date:

Place:

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## **VERIFICATION**

I, ....., S/o / D/o, Sh. ...., resident of  
.....,  
do hereby declare that the information provided in this affidavit is true to the best of my knowledge and belief.

Deponent

Date:

Place: