



BHAIYYUJI MAHARAJ SCHOLARSHIP APPLICATION FORM 2019 – 2020

(Affiliated to Makhanlal Chaturvedi National University of Journalism & Communication)

U.G.C., A.I.U., A.C.U. & Govt. Recg. Degrees

Andhakshi Building, 37 Gilbert Hill Road, Behind Andheri Recreation Club, Near Bhavans College, Andheri (West), Mumbai – 400 058 India

Phones : +91- 22 - 26250608 & 09 / 2670 4105 Website: www.sbc.ac.in Email: info@sbc.ac.in / mediadegrees@gmail.com

IMPORTANT INSTRUCTIONS:

1. Please read the instructions given in the information bulletins carefully & write the course name correctly.
2. Write all the particulars in dark blue/black ink and in capital letters.
3. The application form should reach the institute before the last date.
4. No application form received after the due date would be entertained
5. Please paste the photograph neatly with gum or adhesive.
6. Please do not pin or staple the photograph.

**Affix Recent
Passport size
Photograph**

Course Applied for : _____

Name: Mr./Mrs./Miss : _____

Father's/Husband's Name: _____

Date of Birth : _____ Age: _____ Gender: Male / Female _____

Permanent Address : _____

_____ City: _____ State: _____ PinCode: _____

Present Address: _____

_____ City : _____ State: _____ PinCode: _____

Telephone: Std Code: _____ No.: _____ Mobile: _____

E-mail: _____ Aadhaar Card No.: _____

Educational Qualifications (Start with last School / College / University attended)

INSTITUTION/ UNIVERSITY/SCHOOL	COURSE / DEGREE	YEAR	MARKS / GRADE

Other Qualifications (Computers / Language / Cultural / Sports etc.)

INSTITUTION	YEAR	SUBJECT	Certificate/Award

Social Work Experience (Including Internships)

ORGANIZATION	YEAR	DESIGNATION	JOB PROFILE

Worked On which Level: International / National / State / Local / Regional

Any Awards Received: Yes / No. If yes, then give the details _____

Name two references with whom you have participated in social work

(1) Name: _____ Mobile: _____
Email Id: _____ Organization: _____
Designation: _____

(2) Name: _____ Mobile: _____
Email Id: _____ Organization: _____
Designation: _____

Attach Documents, Links or Any Proof of Your Social Work

Declaration: I hereby declare that the information provided by me is true to the best of my knowledge & belief. In case any entry is found to be false, I have no objection if the institute cancels my scholarship. I promise to abide by the rules and Regulations of the institute. I undertake the decision of the screenary committee would be final and binding.

Date:

Place:

Signature of the Applicant