

DSBF/MDU 2023-2024

Application for DSBF - DIPLOMA COURSES
For Wards of all Non-Gazetted Staff under MDU Division
(Maximum 2 Elder children at a time only)

This application format is eligible only for grant of Scholarship to the wards pursuing DIPLOMA Courses only for the year 2023-2024.

Affix Latest
passport size
photograph of the

(Photo to be attested
by Institution/College)

(Bank details has to be furnished in the Proforma enclosed as Annexure-I).

1.	Name of the employee	Designation	Office/Station
2.	Date Of Appointment	Bill Unit	PF No.
3.	VII PC Pay MatrixLevel	Pay level Rs.	Pay Rs.
4.	Whether the employee belongs to SC/ST/OBC/UR/PH (Tick relevant column)	SC ST OBC	UR PH
5.	Name of the Ward	Gender	Date of Birth
	Name of the Course	Year of study	Relationship
			Amount paid for Last year from DSBF-2022-2023
	<u>Name & address of the institution</u>	Particulars of the course studying/ year <u>(2023-24 only eligible)</u>	Duration of the course
7.	Residential Address		
8.	Telephone Nos	Railway Phone No:	Mobile No. Employee Supervisor
10.	Fee paid for the current year	Year 2023-24	Amount Rs.
11.	Details of other Scholarship from any other source.		Amount Rs.
	SB Account No. of Ward (Enclose copy of ward's Pass Book)	SB A/c No.	
		IFSC Code:	
		Bank Address:	

12.	Has He /She applied for any other Scholarship under SBF for the current year , If so , give complete details thereof	Yes	No
13.	If any other child is getting Scholarship from SBF, Give details	Yes/No	

Certify that:

- a) No student other than my Son/daughter. (Name) is enjoying the educational aid that has been applied for.
- b) Particulars shown regarding my Son/daughter are as furnished by me in Pass declaration.
- c) All the details furnished above are true to the best of my knowledge and if found to be false in future, I shall be taken up under D&A Rule.

Station!

Signature of the Applicant: _____

Date:

Designation _____

Certified that the particulars given against columns 1 to 13 are correct

Station:

Date:

Signature & designation of the Supervisor with seal.

Certificate from the Educational Institution/College/University in which the Student is Studying

Certified that _____ (student's name) is a bonafide student of this Institution _____ (name of the Institution) and is at present studying in _____ (name of the course) _____ (discipline) (I/II/III/IV year during the academic year _____

Station _____

Date _____

Seal of the College /Institution

Signature of the Head of the Institution with seal

ANNEXURE - I

**SOUTHERN RAILWAY
DIVISIONAL STAFF BENEFIT FUND
MADURAI DIVISION**

(BANK DETAILS OF THE WARD HAS TO BE FURNISHED)

(For Diploma Scholarship only)

(Annexure I to application for DSBF Financial assistances for grant of Scholarship for Diploma Courses - 2023-2024)

Ref: Letter No.T/P.641/DSBF/TPJ/2023-2024 dt.04.10.2023 and 09.10.2023.

(PLEASE FILL THE DETAILS CLEARLY TO AVOID DELAY IN PAYMENT)

Name of the employee:	
Staff No.	
P.F.No.	
Designation and Station	
Mobile Number	
Railway Phone	
Mobile Number of the Supervisor	
Bill Unit No.	
Name of the ward applied for DIPLOMA 2023-2024	
S.B.Account No._____	
IFSC code No	
Bank Address	
Clear Xerox copy of the Ward's Bank pass book has to be enclosed.	

I hereby declare that, the SB Account number and other details furnished above is my account and the details furnished above are correct.

Place:_____

Signature of the employee:_____

Date:_____

Designation and Station :_____

Verified bank details of ward with Bank pass book and found correct. Forwarded to The Chairman/DSBF & Sr.DPO/TPJ.

Place:_____

Signature of the Supervisor:_____

Date:_____

Office Seal: