



## INSTRUCTIONS PAGE

Please read the following instructions before filling the application form:

1. Enter all the details in BLOCK letters using a ball point/gel pen and complete all the sections in full.
2. Applicants are required to submit the application form with the following enclosed:
  - One recent passport size color photograph.
  - Clear photocopy of the:
    - First two pages of the applicant's bank pass book. Please note that Grameen Bank accounts will NOT be accepted.
    - Applicant's Aadhaar Card.
    - Grade 10 certificate.
    - Grade 12 certificate.
3. Application window:

The applications will be available from September 11th, 2017 and the last date for submitting the form is October 11th, 2017. Applicants are encouraged to apply at the earliest possible date.
4. The application form along with the enclosures must reach the following address by post or a reliable courier. Wipro Cares is not responsible for any lapse in postal or courier services

The filled in application must be addressed to:

Wipro Cares – Santoor Scholarship,  
Doddakannelli,  
Sarjapur Road,  
Bangalore – 560 035.  
KARNATAKA.

5. In case of any queries email at [santoor.scholarship@wipro.com](mailto:santoor.scholarship@wipro.com) or call on +91 7337835166

## TERMS AND CONDITIONS:

The applicant is required to read the following terms and conditions in its entirety. The candidate on submitting the application is deemed to have accepted the terms and conditions herein.

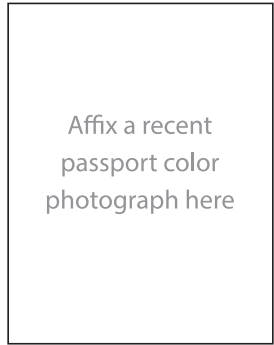
1. This form is meant for applying for a grant under the 'SANTOOR SCHOLARSHIP' program for the year 2017-18, for girl students who wish to pursue higher education after grade 12, in any discipline of a minimum of three years' duration.
2. Eligibility criteria:

To be eligible to apply, the applicants must:

  - Have successfully completed their grade 12/ inter/PUC in the academic year 2016-17 in a government school/college.
  - Have completed their grade 10 in a government school.
  - Enroll for a full time recognized degree program beginning 2017-18, in any recognized educational institution. The duration of such a course should be of a minimum of three years.
3. Any application which does not meet the prerequisites is liable to be rejected
4. Wipro Cares reserves the sole right to offer the scholarship and also has the right to modify/reject/withdraw and/or discontinue the offer without assigning any reason. No other body/agency is authorized to make any offer on the Santoor Scholarship.

# APPLICATION FOR GRANT UNDER SANTOOR SCHOLARSHIP PROGRAMME 2017-18.

APPLICATION No.   
(Wipro Cares will generate the application number)



## PERSONAL AND CONTACT DETAILS:

1. Name in full (as it appears on grade 10 certificate)

2. Date of Birth (date/month/year) :

3. Aadhar Number of applicant:

4. Domicile:

- Karnataka
- Andhra Pradesh
- Telangana

5. Father's name:

6. Mother's name:

7. Address for communication:

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\_\_\_\_\_ Village/Town/City \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_

Pin code  ;

8. Permanent address:

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\_\_\_\_\_ Village/Town/City \_\_\_\_\_

District \_\_\_\_\_ State \_\_\_\_\_

Pin code:

9. Contact details:

Mobile number of:

Applicant : +91

Father : +91

Mother : +91

**EDUCATION DETAILS:**

10. Details of School/Junior College/Inter/PU education:

	Class 10	Class 12/PUC
a. Name of the school/Junior/PU College		
b. Complete address of the school/college, district/city and state.		
c. Percentage/grade		
d. Year of passing		

Details of the course enrolling for :

Name of the course and duration	
Major subjects	
Name, address and contact number of the institution	

**DECLARATION BY THE APPLICANT**

I hereby declare that the information furnished above is true. I understand that I may be asked to produce documents in support of the claims made in the application, and authorize Wipro Cares to review and verify the information provided to establish its authenticity. I agree that if the information provided is found to be false/incorrect it may result in rejection of the application or withdrawal of future grant provided at any time of the tenure of the scholarship program.

Date: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_

Parent/guardian's signature: \_\_\_\_\_

**DECLARATION BY THE PRINCIPAL OF THE CURRENT COLLEGE**

I hereby validate that the information furnished above by the student is true to the best of my knowledge. I agree that if the information furnished is false/incorrect it may result in the rejection of the application or withdrawal of future grant provided at any time of the tenure of the scholarship program.

Date: \_\_\_\_\_ Principal's signature \_\_\_\_\_

Principal's name and seal \_\_\_\_\_