## Jesuit Education Support (JES) Application Form

| Affix | • | -   | ont | -  | hat | -  |
|-------|---|-----|-----|----|-----|----|
| AIIIX | ď | IEC | ᄪ   | LU | HU  | lU |

| Na  | ame of Institution       | ST. XAVIER'S COLLEGE OF EDUCATION   |   |  |  |  |
|-----|--------------------------|---|---|--|--|--|
| Ac  | cademic Year             | :2023 - 2024  |   |  |  |  |
| Ca  | ndidate's Name           | \$<br>\$  |   |  |  |  |
| De  | partment Number          | 3   |   |  |  |  |
|     | ajor                     | Hosteller: yes() No()   |   |  |  |  |
| 1   |                          | (Tick off the relevant one)   | _ |  |  |  |
| 01  |                          | male [ ] Transgender [ ]  | 7 |  |  |  |
| 02  |                          | ]; b) Christian[ ]; c)Hindu [ ]; d)Muslim[ ]; e) Other [ ]                              | Ť |  |  |  |
| 03  |                          | Catholic[ ] b)Dalit Christian [ ] c)SC[ ] d)ST[ ] e)MBC[ ] f)BC[ ] g)OBC[ ] h)Other [   | ī |  |  |  |
|     |                          | n[ ]; b)Semi-Orphan[ ]; c)Physically Challenged[ ]; d)First Generation Learner [ ];     | _ |  |  |  |
| 04  | Any Other (Specify):     |   |   |  |  |  |
| 05  | Bank Details of the Ca   | ndidate, if available:  | ī |  |  |  |
|     | a) Name:                 |   | Ī |  |  |  |
|     | b) A/C Number:           |   | Ť |  |  |  |
|     | c) Bank Name:            |   | Ī |  |  |  |
|     | d) Branch:               |   | Ī |  |  |  |
|     | e) IFSC:                 |   | Ī |  |  |  |
|     | f) MICR:                 |   | Ť |  |  |  |
| 06  | Name and Contact infor   | mation of the Parent/Local Guardian:  | Ī |  |  |  |
|     | a) Name:                 |   | - |  |  |  |
|     | b) Postal Address:       |   | - |  |  |  |
|     | b) i ostal Address.      |   |   |  |  |  |
|     | c) Tel/Cell No.:         |   | _ |  |  |  |
| II  |                          | kground of Family (with documents):   | 7 |  |  |  |
| 07  | Information about Fa     |   | - |  |  |  |
| 0,  | a) Father Name:          | Alive: Yes [ ]; No [ ]  | 7 |  |  |  |
|     | b) Mother Name:          | Alive: Yes [ ]; No [ ]  | t |  |  |  |
|     | c) No. of Brothers:      | No. of Sisters:   | Ť |  |  |  |
|     | Yearly Income of the V   |   |   |  |  |  |
|     | Occupation: Father :     | Mother :  | ī |  |  |  |
| III |                          | Financial Support applied for:  | Ī |  |  |  |
| 08  | a) The Total Tuition fe  | e:  | Ī |  |  |  |
|     | b) The Total Amount yo   | u are applying for Concession:  |   |  |  |  |
| 09  |                          | able to pay on your part:   |   |  |  |  |
| 10  | Other Sources of Help:   |   |   |  |  |  |
|     |                          | eady or expect to receive financial support from other sources: Yes[ ]; No [ ]          |   |  |  |  |
|     | If yes, indicate the Sou | rce of Support: 1)Government [ ]; 2) Other Organizations[ ]; 3) Jesuit Scholarship [ ]; |   |  |  |  |
| 11  |                          | the Jesuit Management in the previous year, if any:                                     |   |  |  |  |
| 12  |                          | Jesuit, please mention the name:  |   |  |  |  |
| 13  | Do you have arrear? If   |   |   |  |  |  |
|     | No. of days absent in c  | urrent semester:  |   |  |  |  |
|     |                          |   |   |  |  |  |
|     | Date:                    | Signature of the Applicant Signature of the Parent/Warden                               |   |  |  |  |

Kindly provide the photocopy of following documents 1. Previous Semester Mark Sheets 2. Current Semester Attendance Sheet