

INLAKS SCHOLARSHIP APPLICATION FORM
All fields must be filled in

CANDIDATE'S BACKGROUND

Date of Birth: Ms. Mr. Name

Address Of Correspondence _____

Tel.(with STD Code) _____ Mobile: _____

Email: _____

Present Occupation _____

University Education

Degree obtained	Year	Subject	Institution/University	Class/Grade/Percentage

Academic distinctions, Grants, Scholarships, Prizes awarded _____

GRE or TOEFL? Give results and percentage: _____

Extracurricular attainments: _____

Working experience / Projects pursued

Organisation	Years	Position

PROPOSED PROGRAMME

Subject Degree / Course admitted to _____

Institution admitted to _____

Exact duration of the course _____ Yrs Dates From : _____ To _____

Funds required for the whole period (€, £, \$): Tuition _____ Living Allowance _____ Total _____

Any grants awarded for the above course: (specify) _____

Other sources of funding/Fee concession/Personal resources/ Loan, if any for the above course: _____

Have you applied for any other courses anywhere other than the one on this form: Give details :

Describe below your present occupation and your achievements to date(Typed statement not exceeding 400 words)

No Annexures

Describe in detail your proposed course or specific project and its relevance to your career goals. Give reasons for pursuing it abroad. (Typed statement must not exceed 400 words). In the case of a specific project, indicate separately your proposed travel schedule and detailed estimated expenditure.

Permanent Address: _____	Affix Photograph
Telephone: _____	
Profession of Parent/Guardian: _____	
Give results of any other application you have made for a scholarship, grant, assistanship, financial help or loan: _____	

Have you previously been interviewed for Inlaks Scholarship? If yes, give year and place: _____

Please specify materials enclosed. These must carry your name and address: _____

Name, occupation and address of three referees under at least two of whom you have studied/ worked with last three years:

S.No.	Name & Occupation	Address
1		
		Tel: _____
		Email: _____
2		
		Tel: _____
		Email: _____
3		
		Tel: _____
		Email: _____

Declaration :

I _____ declare that the information given above and in the enclosed documents is true and complete to the best of my knowledge and belief. I understand that if it is shown at any time that it is false or misleading or that materially relevant information has been withheld, my application will be deemed invalid.

Signature of the Applicant _____ Date: _____ Place: _____

Courier the application form by 15th April to Inlaks Shivdasani Foundation, C/o Inlaks India Foundation, 86/87 Atlanta, Nariman Point, Mumbai 400021	Answer all questions: Incomplete application forms will not be considered. It is compulsory to fill in all fields.
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