



# SIMON FOUNDATION

In Memory of Honourable Lourdhammal Simon



WAVES OF WELFARE AND PROGRESS

## THE ELCY - BOSE SCHOLARSHIP APPLICATION FORM

(For a first year Engineering student, admitted to a Government Engineering College through the counselling process, from an economically poor family belonging to the fisherman community)

**Academic Year: 2026 – 2027**

### 1. Personal Details

Name of the Applicant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age (in years): \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

Contact Number: \_\_\_\_\_

Alternative Contact Number: \_\_\_\_\_

Email ID: (Mandatory) \_\_\_\_\_

Aadhaar Number: (Mandatory) \_\_\_\_\_

Affix recent  
passport-  
size  
photograph  
here

### 2. Admission Details

Name of the Government Engineering College: \_\_\_\_\_

Branch of Engineering: \_\_\_\_\_

Counselling Allotment Order No.: \_\_\_\_\_

Date of Admission: \_\_\_\_\_

First Year Fee Receipt No.: \_\_\_\_\_

### 3. Educational Details

10th Std. — Marks Obtained: \_\_\_\_\_

Percentage: \_\_\_\_\_

12th Std. — Marks Obtained: \_\_\_\_\_

Percentage: \_\_\_\_\_

Year of Passing (10th): \_\_\_\_\_

Year of Passing (12th): \_\_\_\_\_



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Bonafide Certificate No. (from the College): \_\_\_\_\_

## 4. Family & Income Details

Occupation of Father / Guardian: \_\_\_\_\_

Annual Family Income: ₹ \_\_\_\_\_ (as per Income Certificate)

Community Certificate No.: \_\_\_\_\_

Fisherman Family / Community Certificate No.: \_\_\_\_\_

Issued By (Fisheries Department / Fish Producers' Cooperative Society): \_\_\_\_\_

## 5. Bank Account Details (in the Applicant's own name, for disbursal)

Bank Account Holder's Name: \_\_\_\_\_

Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_

Account Number: \_\_\_\_\_ IFSC Code: \_\_\_\_\_

## 6. Attachments Checklist

(tick as enclosed)

- ☐ Counselling allotment order confirming admission to the Government Engineering College, and the first year fee receipt
- ☐ Bonafide certificate from the college
- ☐ Fisherman family / community certificate, issued by the Fisheries Department or the local Fish Producers' Cooperative Society
- ☐ Income certificate issued by the Revenue Department
- ☐ Community certificate
- ☐ Aadhaar card copy of the applicant
- ☐ Mark sheet of the 10th standard examination
- ☐ Mark sheet of the 12th standard examination
- ☐ Bank account particulars in the applicant's own name
- ☐ One passport size photograph
- ☐ A short self-introductory letter (not more than 250 words)

## 7. Terms and Conditions

Chairman: Hubert D. Simon • Secretary: Dr. John Majel P • Treasurer: Jeevan Raj • Trustee: Dr. Isias

Reg. No. BK4/71/2023 | 4/124, Azad Nagar, Colachel - 629 251, Kanyakumari District, Tamil Nadu

Phone: 04651 - 225572, 9655784312 | lourdhamsimonfoundation@gmail.com



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1. The decision of the Scholarship Selection Committee shall be final and binding on all applicants.
2. The applicant should not be receiving, or concurrently availing, any other scholarship or financial concession from any other source for the same academic year.
3. Incomplete application forms will be summarily rejected.
4. Any attempt, direct or indirect, to influence the Scholarship Selection Committee will result in the rejection of the application.
5. The applicant shall furnish any additional document called for by the Foundation, within the time allowed.
6. The Foundation reserves the right to cancel or withdraw the award of this scholarship at any time, without prior intimation.

## 8. Declaration

I hereby declare that the particulars furnished above are true to the best of my knowledge and belief. I have read and understood the terms and conditions stated above and agree to abide by them. I understand that any false information, or any breach of these conditions, may lead to the rejection of my application or to the cancellation of the scholarship already awarded.

Place: \_\_\_\_\_

Signature of the Applicant: \_\_\_\_\_

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

*For Office Use Only* — Application received on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ | Verified by: \_\_\_\_\_ |  
Remarks: \_\_\_\_\_