### No. 05-03/2018-WL/G-II Government of India Ministry of Communications Department of Telecommunications

### Sanchar Bhavan, 20, Ashoka Road, New Delhi-110001 (Welfare/G-II Section)

Dated: February, 2018

#### CIRCULAR

Subject: Award of Scholarship to the meritorious wards of DoT employees for the Academic Year 2016-17.

Applications are invited from the employees of DoT for award of Departmental Scholarship to their wards undergoing the following courses of study:

Sl. No.	Name of Course	Rate of Scholarship	Basic pay limit
1.	Technical Degree Courses- B.E./B.Tech./ Professional MBBS & other Medical Courses in Govt. recognized Colleges/ Institutions	Rs. 800/- per month	No limit
2.	Technical Diploma Courses in Engg./Arch. etc.	Rs. 500/- per month	-do-
3.	Non-Technical Courses- B.Sc./ B.Com./ B.A. etc.	Rs. 500/- per month	-do-
4.	All ITI Courses in ITI Institutes	Rs. 250/- per month	-do-

The rate of Scholarship for each course and the basic pay limit up to which the employees can apply, are shown in the above statement.

- Eligibility conditions for award of scholarship are given below: 2.
  - i) The student must have secured a minimum of 70% marks in the annual examination in the class from which admission to the above course was obtained. Students studying in the first year of the courses may submit their applications for award of Scholarship in Proforma-I.
  - ii) For renewal of Scholarship the ward must secure minimum 65% of marks in the previous year annual examination. If a ward fails in any subject/paper, the scholarship may be renewed provided that he/she secures an aggregate of 65% marks in all the subjects including the subject in which the ward has not got the qualifying marks. For renewal of scholarship to the second or subsequent year of the course, the application may be submitted in Proforma-II.
  - iii) A relaxation of 10% in the minimum marks is admissible to students belonging to SC/ST/OBC and girl students against prescribed percentage for initial grant as well as for renewal. Both the relaxation cannot be combined.
  - An employee can apply for scholarship for first two dependant children iv) including twins and should be an employee of DoT in the academic year 2016-2017. This may be duly verified/endorsed by the applicant through their respective administration. (As per proforma enclosed) BIOSK KERVION

Contd...

- v) No Scholarship is admissible for the last year of the programme / course. Scholarship for 2<sup>nd</sup> last year of the programme / course is payable for 10 months only. The student will have to take admission in the graduation course to take the benefit for his class 12<sup>th</sup> performance. Pass out graduates and students of post graduation courses are not eligible for the scheme.
- 3. Employees claiming relaxation under SC/ST/OBC should also submit the relevant caste certificate issued either by their respective cadre controlling authority or other competent authority as defined for the purpose.
- **4.** In case the spouse of the applicant is employed in any DoT office, a certificate from the employer stating that he / she has not claimed any Scholarship Award for the Academic Year 2016-17 in respect of the children from that office is required to be attached with application.
- **5.** As the Scholarship is granted on the basis of the percentage of marks secured in qualifying examination, candidates who have been awarded results in formats other than percentage format, are requested to furnish relevant documents specifying the criteria / formula for conversion of their result into percentage format.
- **6.** It is mandatory for applicants to furnish their Bank Details (Mandate Form enclosed) for making payments through ECS.
- 7. The applications in the prescribed proforma (copy enclosed) from the eligible officers/officials for grant of scholarship/ renewal of scholarship along with certificate of the Head of Institution and duly attested marks sheet of last annual examination may be sent to the Section Officer (Welfare /G-II Section), Mezz floor, Department of Telecommunications, Sanchar Bhavan, 20, Ashoka Road, New Delhi -110001 positively by 15/04/2018. The applications, which are incomplete in any respect or received after the last date, will not be entertained. Forms are also available at <a href="http://dot.gov.in/circulars/general-section-dot.For">http://dot.gov.in/circulars/general-section-dot.For</a> any clarification regarding Scholarship scheme, Welfare/G-II Section (Tele. No.011-23036464/6897) may be contacted.

Encl: As above.

(Nithal Kam) Welfare Officer & Under Secretary (T) Tel. No. 2303-6300

To

- 1. Chairman, TSWB, DoT.
- 2. All Officers/Sections of DoT HQ, New Delhi.
- 3. ADG (Admn.) TEC Khursheed Lal Bhavan, Janpath, New Delhi.
- All DoT/VTM Cell, in Telecom Circles.
- 5. All Wireless Monitoring Organization, DoT.
- 6. Notice Boards in Sanchar Bhavan/ Dak Bhavan.

## Government of India Ministry of Communications Department of Telecommunications Sanchar Bhavan, 20, Ashoka Road, New Delhi-110001. (Welfare/G-II Section)

\*\*\*\*

### APPLICATION FOR FRESH DEPARTMENTAL SCHOLARSHIP FOR THE ACADEMIC YEAR 2016-17

(A) <u>DET</u> .	AILS OF APPLICANT(EM	<b>1PLOYE</b>	<u>E)</u>
i)	Name (Sh/Smt.)		i
ii)	Designation		ŧ
iii)	Office Address and Secti	ion	I
	With Telephone No.		
iv)	Residential Address		1
v)	Whether belongs to SC/S	T/OBC	:
vi)	Pay Level as on 1st April 2016 (as per 7th CPC):		
vii)	Grade Pay of the spouse		· · · · · · · · · · · · · · · · · · ·
(B) <u>DETA</u>	AILS OF STUDENT		
i)	Name	:	
ii)	Whether Son/Daughter	:	
iii)	Date of Birth	:	

### (C) Details of education for which scholarship is applied for:

i)

Name of Course

Any other higher

examination for

Minimum qualifying

the course undertaken

exam passed

ii)

iii)

					<del></del>
ii)	Whether degree or D	iploma	:		<del></del>
iii)	Total Duration		:		
iv)	Stream of Study (Tec	h/Non-Tech)	:		
v)	Stage at which study	ing	:		
vi)	Name of Institution	*	:		
vii)	State/University by recognized/affiliated		:		
(D) Scholastic Record of the student commencing from Matriculation Examination before joining the course study undertaken by the student shall be supported by Photostatted copies of mark sheet/certificate duly attested.					
	Name of the Examination	Year of Passing	Maximum Marks	Marks Obtained*	Percentage
i)	Matriculation/ Sr. Secondary				

**Note:** If there is a gap between the passing of the minimum qualifying examination and joining the course of studies and is not covered by the scholarship, record, details of the period should be indicated.

<sup>\*</sup> Attach attested mark sheet of the examination passed on the basis of which claim has been submitted.

(E) De	etails o	f Assistance, if any received:		
i)		student exempted from ent of tuition fee ?	:	
ii)	If answer to (i) above is 'Yes' mention the amount exempted		ı	
iii)	Is the student receiving any stipend or monetary assistance from any other source for this study?		£	
iv)	If ans	wer to (iii) is 'Yes'	:	
	1)	Amount	:	····
	2)	Source	:	
Note:	the en	e the spouse of the applicant is employer stating that he/she has not that office is required to be attached.		
Declar i) ii)	Th ar N	ne particulars given above are true an nd belief. o child/dependent of mine is already holarship.	-	
Station	n	:		
Date	:			
				Signature of applicant
				Designation

ertified that the entries under column <b>'C'</b> and column <b>'E'</b> are correct.		
tation: Pate :		
Signature of the Head of Institution (With Seal)		
ertified that the entries under the column 'A' are correct as per office records.		
Signature of the concerned Admn./Staff Br.		
Name:		
Designation:		
Cast Verification Certificate from Cadre Controlling Authority for the employees claiming relaxation under reserved categories		
Certified that Sh/Smt Designationelongs to category as per office records.		
Signature of the concerned Admn./Staff Br.		
Name:		
Designation:		

Note: Separate application may be submitted for each ward.

# Government of India Ministry of Communications Department of Telecommunications Sanchar Bhavan, 20, Ashoka Road, New Delhi-110001. (Welfare/G-II Section)

### APPLICATION FOR RENEWAL OF DEPARTMENTAL SCHOLARSHIP FOR THE ACADEMIC YEAR 2016-17

(A) <u>DE</u>	TAILS OF APPLICANT(I	EMPLOYE	<u>E)</u>
i)	Name (Sh/Smt.)	1 .	
ii)	Designation	١.	
iii)	Office Address and Se	ction:	
	With Telephone No.	-	
iv)	Residential Address:		
v)	Whether belong to SC	/ST/OBC:	
, , i	Crada Pay as an 1st An	wil 2016 (20	per 6th CPC) :
vi)	Grade Lay as on 1. Ap	111 2010 (as	per o Cr C).
			Signature of Applicant
(B) <u>DET</u>	AILS OF WARD		
i	Name of Student :		
i	i) Father's Name :		
i	iii) Whether Son/Dauş	ghter:	
i	v) Date of Birth :		
**	Name of Institution		

	Des		
	Sig		e concerned Admn./Staff Br.
belongs to	category as per office record		
	ertified that Sh/Smt		Designation
	Verification Certificate from Cadre Cont claiming relaxation under r	eserved cate	gories
			Signature and seal Of the Head of Institution
xiv)	Remarks or recommendation of Head of the Institution	:	
xiii)	Whether the student is in receipt of any other scholarship or financial assistance through the Institution. (If so, the amount and details thereof)	:	
xii)	Character & Conduct of the student	:	
xi)	Class to which promoted in the Year Mont	: h	
x)	Stream of Study (Tech/Non-Tech)	:	
ix)	Total duration of the course	·	
viii)	Percentage of marks secured (Please enclose attested mark sheet)	:	<u> </u>
vii)	Name of the annual examination Passed in March/April along with the year	:	

Note: Separate application may be submitted for each ward.

## <u>Verification from Administration for Scholarship Award for the</u> <u>Academic Year 2016-2017</u>

1.	Name of	f the Employee :				
2.	Designa	tion :				
3.	Date of J	Toining in DoT :				
4.	Whether employee of the DoT – : Yes / No During the Academic Year 2016-17					
5.	Details o	Details of first two dependant children including twins as per service record:				
	Sr. No.	Name of the ward(s)				
	1.					
Ì	2.					
	3.					
		Signature of the concerned Administration. /Staff Br.  Name:  Designation:				

### **MANDATE FORM**

## $\frac{\texttt{BENEFICIARY} / \texttt{CUSTOMER'S OPTION TO RECEIVE PAYMENT THROUGH E-}{\texttt{PAYMENT}}$

1.	Beneficiary Name	10
2.	Beneficiary Address	:
3.	Beneficiary Account No	*:
4.	Account Type	•
:4.	(Savings Bank / Current)	
	With Code 10/11/13	
5.	Nine digit code number o	of the:
	Bank & branch. Appearin	
	the MICR Cheque issued	
	the bank (if available)	
6.	Bank Name	:
7.	Branch name	:
8.	Branch Address	:
0		
9.	Telephone no	:
10.	IFSC (Indian Financial Se	
11.	* *	Cheque to confirm correctness of IFSC code and Account
	no.:	
Ţ	hereby declare that the p	articulars given above are correct and complete. If the
		d at all for reasons of incompleteness or incorrectness of
		would not hold the user institution responsible.
	6 <i>y</i>	I
Dated :		() Signature of the beneficiary/customer/applicant
		Signature of the beneficiary/customer/applicant
Cortificat	ion that the particulars fur	nished above is correct as per the records.
Certificat	ion that the particulars full	iished above is correct as per the records.
Rank Sta		
Bank Sta	mp	
D ( )		,
Dated:_		Signature of the authorized official
		With Phone No. from the Bank