



शिवनगर विद्या प्रसारक मंडळ

माळेगांव बु. ॥ ता. बारामती जि. पुणे

मा. खा. शरदचंद्रजी पवार शिष्यवृत्ती योजना

पवार चॅरिटेबल ट्रस्ट कडून गुणवत्ताप्राप्त आणि दुर्बल आर्थिक गटातील शिवनगर विद्या प्रसारक मंडळाच्या महाविद्यालयात शिक्षणासाठी प्रवेश घेतलेल्या विद्यार्थ्यांसाठी शिष्यवृत्ती योजना.

मार्गदर्शक

मा. खा. श्री. शरदचंद्रजी पवार
मा. खा. सौ. सुप्रियाताई सुळे

शिष्यवृत्ती

मा. खा. श्री. शरदचंद्रजी गोविंदराव पवार गुणवत्ता शिष्यवृत्ती
मा. सौ. प्रतिभा शरदचंद्रजी पवार गुणवत्ता शिष्यवृत्ती
मा. खा. सौ. सुप्रियाताई सदानंद सुळे गुणवत्ता शिष्यवृत्ती
मा. ना. श्री. अजितदादा अनंतराव पवार गुणवत्ता शिष्यवृत्ती

निवड समिती -

मा. श्री. प्रल्हाद गुलाबराव वरे	सदस्य
मा. श्री. गौरव दिलीपराव जाधव	सदस्य
मा. श्री. प्रविण हरिभाऊ पांडकुले	सदस्य
मा. श्री. डॉ. धनंजय गणपती ठोंबरे	सदस्य

* संपर्क *

विद्यार्थी विभाग कॉलेज ऑफिस



**SHIV VIDYA PRASARAK MANDAL'S, COLLEGE OF PHARMACY,
MALEGAON (BK.)**

APPLICATION FORM FOR SHARADCHANDRA PAWAR SCHOLARSHIP
For Economically Weaker Students (Needy, Poor, and Meritorious Scholars)

Instructions:

1. Fill in all sections completely using black or blue ink. Incomplete forms will be rejected.
2. Attach self-attested photocopies of all documents.
3. Submit the form to the [College Scholarship Office/Principal's Office] by [Last Date, e.g., DD/MM/YYYY].
4. Declaration must be signed by the applicant and parent/guardian.
5. This scholarship is exclusively for students from low-income families pursuing higher education in our college.

1: Personal Details

Students Full Name in Capital Letter (as per 10th certificate)

Date of Birth (DD/MM/YYYY) : _____

Gender : Male Female Other

Category
(SC/ST/OBC/General/Minority): _____

Aadhaar Number : _____

Mobile Number : _____

Email ID : _____

Residential Address : _____

Pin Code : _____

College Roll Number/Admission Number: _____

Course Enrolled (B. Pharm / M. Pharm): _____

Year of Study (1st/2nd/3rd/Fourth) : _____

Academic Year Applying For: _____

Fees Paid: _____

Are you staying in Hostel Yes/No : _____

Admission type CAP/ACAP/IL : _____

2: Family and Economic Details

(This section verifies economic need; income proof is mandatory for scholarships targeting poor students.)

Father's Name: _____

Father's Occupation: _____

Father's Annual Income (₹): _____

Mother's Name: _____

Mother's Occupation: _____

Mother's Annual Income (₹): _____

Total Family Annual Income (₹): _____ (Must be below ₹2,50,000 for eligibility; attach valid proof)

Number of Family Members: _____

Number of Dependents (Siblings/Children Studying): _____

Family Assets (if any: Land/House/Vehicle – for need assessment): _____

Any Other Financial Assistance/Scholarship Received? (Yes/No; If yes, details): _____

Economic Need Statement: Briefly describe your family's financial challenges and how this scholarship will help (100-200 words).

Are you a single parent Yes/No : _____

Orphan Yes/No : _____

3: Academic Details

(Merit is assessed based on prior performance; minimum 60% aggregate required for most NGO scholarships.)

Year	Board / University	Year of Passing	Percentage/CGPA
Fourth Year			
Third Year			
Second Year			
First Year			
10th Standard (SSC)			
12th Standard (HSC)			

Extracurricular Achievements: List any awards, sports, NSS/NCC participation, or community service (relevant for holistic NGO evaluations).

Behavior certificate from GT (Guardian Teacher) attached Yes/No:

5: Student's SWOT Analysis

SWOT Component

S – Strengths

W – Weaknesses

O – Opportunities

T – Threats

Scholarships received details:

1. Government Scholarships:

2. NGO/Private Scholarships:

Signature of NGO coordinator: _____

6: Bank Details

(For direct scholarship transfer; required for transparency in NGO-funded aid.)

Bank Name :

Branch Name & IFSC Code:

Account Number :

Account Holder Name :

7 : Required Documents

(Attach self-attested copies; originals may be verified. This mirrors document checklists from common NGO scholarships like Vidyadhan or Mahindra All India Talent Scholarship.)

- 1. Recent passport-size photograph (2 copies).
- 2. Aadhaar Card copy.
- 3. Income Certificate (issued by Tehsildar/TDO, not older than 6 months).
- 4. Caste/Category Certificate (if applicable).
- 5. Mark sheets of 10th, 12th, and latest semester.
- 6. College Bonafide/Admission Certificate.
- 7. Bank Passbook first page.
- 8. Ration Card or Domicile Certificate (for residence proof).
- 9. Death Certificate of parents (if single-parent/orphan; for additional need verification).
- 10. Any other (e.g., disability certificate if applicable).
- 11. Receipt of fees paid.

Checklist Confirmation: I have attached all required documents. Yes No

8: Declaration

I, _____ (Full Name),
son/daughter of _____ solemnly
declare that:

The information provided is true and correct to the best of my knowledge.

I belong to an economically weaker section (family income < 2, 00,000 p.a.) and am not availing any other similar scholarship.

If selected, I will maintain a minimum 60% academic performance to continue receiving the scholarship.

I understand that submission of false information will lead to cancellation of scholarship and legal action.

Applicant's Signature: _____ Date : _____

Parent/Guardian's Signature: _____ Date : _____

Name: _____

Relationship: _____

For Office Use Only:

Received on: _____ Date : _____

Verified by: _____ Signature : _____

Recommendation: Approved Rejected Pending

Remarks: _____

Student Photo	Parent Photo	Parent Photo
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Signature

Signature

Signature

Verified by: _____ (Principal/ HOD)

Name: _____

Signature: _____

Recommendation: Approved Rejected Pending

Remarks: _____

For Official Use only

FINAL APPROVAL FORM

(To be filled by Scholarship Committee Members)

Based on the assessments conducted and the recommendations received, the Committee decided to approve/disapprove the application.

Principal Details

Dr. R. B. Jadhav

Signature: _____

Date: _____

For Official Use only

FINAL APPROVAL FORM

(To be filled by Scholarship Committee Members)

Based on the assessments conducted and the recommendations received, the Committee decided to approve/disapprove the application.

Mr. Vare Pralhad Gulabrao

Signature:: _____

Date: _____

Mr. Jadhav Gaurav Diliprao

Signature:: _____

Date: _____

Mr. Pondkule Pravin Haribhau

Signature:: _____

Date: _____

Dr. Thombare Dhananjay G.

Signature: _____

Date: _____

BEHAVIOUR CERTIFICATE

This is to certify that Mr./Ms. _____,

is a bonafide student of SVPMs College of Pharmacy, affiliated to SPPU Pune.

The student has been pursuing _____
(Course & Programme) in _____
(Semester / Academic Year).

During the period of study under my guardianship, the student's conduct, discipline, and behaviour have been found to be satisfactory and in accordance with the rules and regulations of the University and the College. No adverse remarks regarding the student's conduct have been reported during this period.

This certificate is issued by the undersigned Guardian Teacher upon the request of the student for official and academic purposes.

Guardian Teacher

Name: _____

Signature: _____

Date: _____

ATTENDANCE CERTIFICATE

This is to certify that **Mr./Ms.** _____,

bearing **Roll Number** _____,

is a bonafide student of **_SVPMS College of Pharmacy, Malegaon (Bk)**
and studying in _____

The student has maintained **satisfactory and regular attendance** during the
academic period **from** _____ **to** _____, with an attendance
percentage of _____%, as per institutional records.

This certificate is issued upon the request of the student for **official and
academic purposes.**

Date:

Place:

Guardian Teacher

Name: _____

Designation: _____

Department: _____

Signature: _____