



NOTES / INSTRUCTIONS

- ❖ Application could be fully completed. Any data missing for the required fields, may be the cause of rejection.
- ❖ If required, a separate sheet can be used for describing your needy situation.
- ❖ Money will not be directly sent to the student; rather will be sent to head of the institution / Hostel / Book shop etc. Even to them, no personal account is accepted.
- ❖ Applicant name should have written with first name first and last name last
- ❖ All addresses should be complete so that communication is errorless
- ❖ Email id, phone numbers should be accurate and vividly written
- ❖ Attestation by the head of the institution is a must
- ❖ Please use capital letters while filling up the application

ENCLOSURES

- ❖ Marks certificate for the two years 2024-25 & 2023-24
- ❖ Income certificate of the Parent / Guardian
- ❖ If the parent(s) is(are) not alive, then the Death-certificate

APPLICATION DEADLINE

Application mailing address:

Alambana India,
4-222, Superbazar Road,
PRODDATUR,
Kadapa District, Andhra Pradesh 516360.

Applications received after July 31st 2025 will NOT be accepted.

Applicant's Name			
Residential Address	Street: City/ Town/Village: District: State: PIN CODE: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Contact Phone Number		
Email ID		Date of Birth	
% of Marks / GPA for 2024-25		% of Marks / GPA for 2023-24	
Father's Name			
Mother's Name			

Check one of the following boxes.

<input type="checkbox"/> Only Father alive	<input type="checkbox"/> Only Mother alive	<input type="checkbox"/> Both alive	<input type="checkbox"/> Both Not alive
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If both (the parents) are not alive, Guardian's Name

Guardian's Name		Relationship	
Annual Income	₹	Telephone No.	
Parents' Residence Address	Street: City/ Town/Village: District: State: PIN CODE: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Contact Phone Number:		
Currently enrolled Class/Standard			
Name of the School/ College			
Address of the School/ College/ University/ Institution	Street: City/ Town/Village: District: State: PIN CODE: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Contact Phone Number		

DECLARATION FROM THE APPLICANT

I hereby declare the above information provided by me is correct and complete.

Signature of the Applicant : _____ Date: _____

DECLARATION FROM THE PRINCIPAL/ HEAD OF THE INSTITUTION

I hereby declare the above information provided by the student (photo pasted below) is correct and complete. Academically he stands ___ rank out of ___ students in his/her last final exams and is the most deserving student for aid.

Seal of the Institution:

Signature of the Principal/Head of the institution
Date:

Please paste the applicant's recent picture and get it attested by the principal

Mention the Help Needed, including Cost:

	No	Yes		No	Yes
School fee	<input type="checkbox"/>	<input type="checkbox"/>	₹	<input type="checkbox"/>	<input type="checkbox"/>
Boarding	<input type="checkbox"/>	<input type="checkbox"/>	₹	<input type="checkbox"/>	<input type="checkbox"/>
Uniform	<input type="checkbox"/>	<input type="checkbox"/>	₹	<input type="checkbox"/>	<input type="checkbox"/>
School supplies	<input type="checkbox"/>	<input type="checkbox"/>	₹	<input type="checkbox"/>	<input type="checkbox"/>

BANK INFORMATION

School / College/ University Bank Information:

Account Holder Name	
Account Number	
Name of the Bank	
IFSC	

Hostel / Warden Bank Information :

Account Holder Name	
Account Number	
Name of the Bank	
IFSC	

Book Shop etc., Bank Information:

Account Holder Name	
Account Number	
Name of the Bank	
IFSC	

FOR OFFICE USE ONLY

Application Received Date:	
Application Number	