 **Maharaja Ranjit Singh Punjab Technical University, Bathinda**

**Stakeholder Scholarship Form**

**Session for which scholarship is given:**

**Details of Scholarship Source:**

Type of Source: Organization/Individual

Name of Organization:

Name of Person:

Address:

Amount given for Scholarship:

Mode of Payment: Cash/ Account transfer

**Date: Name, Signature and Designation of Concerned Official**

**Details of Recipient**

Name of Student:

Father Name:

Batch:

Department:

Programme:

University Roll No.:

Proof of Receipt, if any attached – Yes/No

**Disclaimer:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ S/o/D/o \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, student of \_\_\_\_\_\_\_\_\_\_department has received Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as scholarship from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Signature of Recipient**

**Mobile No. -**

**Verified by**

**Signature**

**(Concerned Authority)**

*Note: This Scholarship Form is to be submitted to Scholarship Cell Coordinator – Dr. Abhilasha [M: 9312941071] Room No. B-204, GZSCCET, MRSPTU*