

DECLARATION OF PARENT/GUARDIAN – REGARDING COMMUNITY

I ..... F/o or G/o ..... who is studying in std..... at ..... hereby declare that my son/ daughter is belongs to ..... of minority community.

If any stage, it is found that the information given by me is not true, all benefits Given to the student under the scheme of “Pre-matric scholarship for students belonging to minority Communities” could be withdrawn and legal action as deemed fit , may be taken against me or my ward.

Signature

Name

( Father / Mother / Guardian)

Date

Residential Address

With phone No.