

**SHAHEED BHAGAT SINGH (EVE) COLLEGE**  
*(University of Delhi)*

**FEE CONCESSION AND STUDENT'S AID FUND**  
**COMMITTEE**

**NOTICE**

22<sup>nd</sup> August, 2023

This is for the information of all the students (2023-24) that Fee Concession and SAF Committee invites applications from the students having financially weaker background for the grant of financial assistance. The applications duly supported by following documents should reach the College Office through email at studentaidfund@sbse.du.ac.in latest by 29<sup>th</sup> August, 2023.

1. Pay slip of Parents/Income Proof of Parent
- 2.. Bank Statement for the last six months of Parents.
5. Any other relevant documents

  
**(Prof. Arun Kumar Attree)**  
**Principal**

**Sd/-**  
**(Sunder Singh)**  
CNR,  
Fee Concession SAF Committee

1. S.N.B.
2. O/Copy
3. College website



Please paste  
your recent  
Passport Size  
Photo

**SHAHEED BHAGAT SINGH (EVENING) COLLEGE**  
*(University of Delhi)*

**STUDENT AID FUND FORM- 2023-24**

Note: The applicant is required to fill in the forms in his/her own handwriting carefully and correctly. Any statement made in this application, discovered to be incorrect at any time will render the applicant liable to disciplinary action.

1. Name of the applicant (in block letters): \_\_\_\_\_  
College Roll No. \_\_\_\_\_ Course/Year: \_\_\_\_\_
2. Father's Name: \_\_\_\_\_ Occupation/Designation: \_\_\_\_\_  
Income (annually): \_\_\_\_\_ Education: \_\_\_\_\_
3. Guardian's Name (Supporting the Applicant): \_\_\_\_\_ Relation: \_\_\_\_\_  
Occupation of the Supporter: \_\_\_\_\_ Occupation/Designation: \_\_\_\_\_  
Total Income Including allowances: \_\_\_\_\_
4. Number of Dependents on supporters: \_\_\_\_\_  
Studying in College: \_\_\_\_\_ In School: \_\_\_\_\_ Nowhere: \_\_\_\_\_
5. Were you enjoying Student Aid Fund in the previous class? If so, state the amount: \_\_\_\_\_
6. Bank Details: A/c Holder Name \_\_\_\_\_, A/c NO. \_\_\_\_\_  
IFSC Code. \_\_\_\_\_ (Please attached the copy)
7. No. of Encls.: \_\_\_\_\_

Date: \_\_\_\_\_ Mobile No. \_\_\_\_\_

Signature of Applicant

**DECLARATION**

I hereby declare that the particulars given above are correct to the best of my knowledge and belief.

Date: \_\_\_\_\_

Signature of Applicant

Recommendation of the Convener, Rs.. \_\_\_\_\_

**CONVENER, SAF COMMITTEE**

**PRINCIPAL**