GOVERNMENT OF GOA  
DIRECTORATE OF SOCIAL WELFARE, 
18th JUNE ROAD, PANAJI-GOA 
Phone: (0832)- 2223784, 2232257; Fax : (0832)/2228172 
Dated: 22/07/2019

CIRCULAR

Sub: “Gagan Bharari Shiksha Yojana” for students belonging to Scheduled Castes Community.

It is informed to all the Heads of the Educational Institutions that, applications of students belonging to Scheduled Castes Communities in case of above mentioned scheme shall be obtained at the time of admission to the concerned Stream. A list of students accompanied with duly filled Application Form and requisite documents such as, Income certificate, Fee Receipts, Passing/Mark Sheet, Aadhar Card, Bank Account of student, Hostel Certificate (if applicable), Pre-Receipt duly signed by the student and countersigned by Head of Department) shall be submitted to this Directorate along with the details of the students given in the enclosed proforma (Annexure “A”) in the form of Hard copy as well as Soft copy compulsorily failing which applications will not be entertained. The Applications should reach this Directorate on or before 31st August 2019 positively duly completed in all respect and supported with all the documents prescribed under the scheme. Incomplete applications & without soft copy will not be entertained.

Eligibility Criteria:

Students belonging to Scheduled Castes Communities must have availed or eligible for Centrally Sponsored Post Matric Scholarship during the current academic year and any Scheduled Castes Communities student whose family income is less than 2 lakhs is eligible under the scheme “Gagan Bharari Shiksha Yojana”.

Benefit under the scheme:

a. Additional Maintenance Allowance of Rs. 750/- p.m. for Day Scholar and Rs. 1500/- p.m. for those staying in Hostel during the academic year (for ten months).

b. Additional Disability Allowance of Rs. 750/- p.m. during the academic year (for a period of ten months) is given.

The students applying under scheme “Gagan Bharari Shiksha Yojana” may kindly be instructed to open a saving Bank Account in any Nationalized Bank, as the amount of Scholarship will be directly credited to the Bank Account of the student.

The applications received first will be given first preference, simultaneously the applications received after due date will not be binding on the State Government to sanction the same.

(Parag Nagarcenkar)  
Director of Social Welfare &  
Ex-officio Jt. Secretary

Encl:- 1. Application Form  
2. Proforma (Annexure A).

To,  
The Principal,
Government of Goa
Directorate of Social Welfare, Panaji-Goa
"GAGAN BHARARI SHIKSHA YOJANA"
Annexure III (Para 15)
Post Matric Scholarship Scheme for Scheduled Caste Students of the State of Goa.
Application form for FRESH Scholarship

PART-A
(To be filled in by the applicant)

1. Name in full (in block letters)
2. Father's/Husband's name
3. Nationality
4. Whether belongs to Scheduled Cast Community, if yes (enclose caste certificate valid for 3 years from the date of issue)
5. State where permanently settled
   State
   District
   Full address
6. Whether applicant is employed
   If yes, give
   i) Name and address of your employer
   ii) Total monthly income including all allowance
   iii) Whether the applicant has to support a family or not
   a) Applicant’s annual income
   b) Father’s/Guardian’s annual income
   iv) Total annual income from all sources of the family including your own in the preceding year ending 31st March, __________ (enclose income certificate)
7. Name & address of the Guardian and relationship with the applicant
8. Particulars of examinations taken commencing with the matriculation or equivalent examination (Please attach attested copy of certificates, mark sheets. Any break in educational career should be mentioned in remarks column indicating also how he/she occupied himself/herself in that period)

<table>
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<tr>
<th>Name of examination</th>
<th>Year in which taken</th>
<th>Whether passed or not, in case of last examination passed, indicate percentage of marks and division</th>
<th>Institution and University/Board</th>
<th>Remarks</th>
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9. Whether in receipt of scholarship under this scheme or any other scheme in the previous year, if yes, indicate
   i) Name of the scholarship scheme
   ii) Course of study for which scholarship was given
   iii) Name of the institution in which the scholarship was awarded

Yes/No
i) Course of study for which scholarship is applied (Certificate, Diploma or Degree) please specify

ii) Class in which studying this year

iii) Date of joining the class

iv) Details of Bank Account of the student
   a) Name of the Bank
   b) Branch/Address of the Bank
   c) Account number
   d) MICR Code No.
   e) Aadhar Card No.
   f) Contact No. of the students

11. If residing in the Hostel of the Institution or a Hostel approved by (indicate particulars) (attach a certificate from the Hostel and specify the period of stay) Name:
    Address:
    Date of joining:

12. Number of children receiving Post Matric Education in the current year including the applicant.
    Give particulars:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name</th>
<th>Age</th>
<th>Class &amp; course in which studying</th>
<th>Name of institution where studying</th>
<th>Whether applied for GOI scholarship</th>
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Documents attached:
1. Caste certificate (Provisional certificate valid for 3 years from the date of issue).
2. Income certificate (Income certificate valid for 3 years from the date of issue).
3. Attested copies of mark sheet certificate.
4. Attested copy of fees paid.
5. Hostel certificate (If applicable).
6. Copy of Aadhar card.
7. Copy of Bank Account of student.
8. Pre-Receipt duly signed by the student/countersigned by Head of the Department.

I/We hereby declare that I/We have read the regulations of the scheme and agree to abide by the terms and conditions of the award. I/We testify that the statement made in the application are correct and if any of them are found to be incorrect by the authority whose decision will be final and binding on me/us.

I/We undertake to refund to the said authority on demand the entire amount of the scholarship received by me/us or overpaid to me/us, failing which the said authority may recover the amount from me/us through whatever means if deem proper.

Date:

i) Signature of the applicant

ii) a) Signature left/right hand thumb impression of the parents/guardian

b) Full name in capital letter

c) Relationship of Guardian to student
1. Duration of the course in which the applicant is studying

2. Compulsory fees (excluding hostel rent) and other incidental charges to be paid by the applicant to the Institution for the current year from __________ to __________ as per details given below:

<table>
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<tr>
<th>Sr. No</th>
<th>Particulars of all non-refundable compulsory fees payable by the applicant</th>
<th>Rate</th>
<th>Amount actually payable by the applicant to the institution</th>
<th>Remarks</th>
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<td>Tuition fees</td>
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<td>Examination fees</td>
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<td>Games</td>
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<td>4</td>
<td>Medical</td>
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<td>Library</td>
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<td>6</td>
<td>Identity card</td>
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<td>7</td>
<td>Practical fee</td>
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<td>8</td>
<td>Enrolment fee</td>
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<td>9</td>
<td>Laboratory fee</td>
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<td>10</td>
<td>Subject wise extra fees, if any, such as Home Sciences, Geography</td>
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<td>Any other fee compulsory payable (to be mentioned item wise with amount)</td>
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<td><strong>Total</strong></td>
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3. If the applicant is residing in a Hostel, indicate if any, he/she is entitled to free board and lodging free board/free lodging:

4. Certified that:
   i) Information given by the applicant in Part-A has been checked and found correct/has been corrected in red ink.
   ii) The course in which the applicant is studying in this Institution is post matric one.
   iii) This Institution is affiliated to ___________________________________________
        University/Board and is recognized by the Government of India/Goa.

5. The applicant is studying in
   Course in this Institution and the minimum qualification required for admission to the course is passed in the __________________________ examination.

6. I undertake that the scholarship amount in respect of the applicant is and when placed at my disposal will be disbursed by me for the specific purposes for which it is given and the accounts will be regularly rendered to the authority which awarded the scholarship.
In case the applicant leaves the Institution or otherwise discontinues the studies or accepts any other scholarship/stipend, the fact will be immediately reported to the said authority and payment of scholarship to the applicant will also be discontinued. The undischased amount lying with the Institution on account of maintenance charges, fees etc., will also be refunded to the Government account.

Signature of the Head of the Institution

Name in capital letters

Address: ____________________________

Place: ____________________________

Seal of the Institution

Date: ____________________________
Pre-Receipt

Received the sum of Rs.........../- (Rupees ........................ only) from the Directorate of Social Welfare, Panaji under the Scheme Post Matric Scholarship Scheme “Gagan Bharari Shiksha Yojana” for SCs student for the year 2019-20.

Signature of the Student

Stamp & Sign of Head of the Institution

For an amount of Rs.5,000/- & above, Revenue stamp to be affixed.

Pre-Receipt

Received the sum of Rs.........../- (Rupees ........................ only) from the Directorate of Social Welfare, Panaji under the Scheme Post Matric Scholarship Scheme “Gagan Bharari Shiksha Yojana” for SCs student for the year 2019-20.

Signature of the Student

Stamp & Sign of Head of the Institution

For an amount of Rs.5,000/- & above, Revenue stamp to be affixed.
**ANNEXURE - A**

Applications received under "GAGAN BHARARI SHIKSHA YOJANA" TO SCHEDULED CASTES STUDENTS for the year 2019-20

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Name of the Institution</th>
<th>Name of the Student</th>
<th>Name and Address of the Parent</th>
<th>Constituency</th>
<th>Class/ Std</th>
<th>Sex</th>
<th>Host/ Day Scholar</th>
<th>Fees paid</th>
<th>Bank Name</th>
<th>Account No</th>
<th>MICR CODE</th>
<th>IFSC Code</th>
<th>Aadhar No</th>
<th>Income</th>
<th>Contact No</th>
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