PRATHIBHA SCHOLARSHIP 2024-25

**E-PAYMENT FORM**

# Details of the Prathibha Scholar

Name :

Course of study : ( *tick as applicable*)

3-year U.G/ 4-year UG (FYUGP)/ 4-year UG (Hons)/5-year Integrated P.G programme Course

Subject Main :

College/University :

*(Name and place)*

# Bank account details for receiving scholarship through E- payment.

|  |  |
| --- | --- |
| **Name of the student***(as in Bank records)* |  |
| **Bank Account No.** |  |
| **Name of Bank** |  |
| **Branch Name** *(Place)* |  |
| **Bank Address** |  |
| **IFSC** |  |
| **Mobile no. of the student** |  |

Date: Signature of student:

Place: Name: