



# SYMBIOSIS SKILLS AND PROFESSIONAL UNIVERSITY

(Established under Govt. of Maharashtra Act No. XXXVII 2017 dated 3rd May 2017)  
Kiwale, Adjoining Mumbai - Pune Express Highway, Pune 412 101,  
State – Maharashtra, INDIA. | <http://www.sspu.ac.in>

Application No: \_\_\_\_\_

Affix Your  
Passport Size  
Colour Photo here

## Scholarship Application for SAARC, African and Other Countries For the Year 2024-25

### Details of the Applicant:

Name of Programme: \_\_\_\_\_ UG  PG

Student Full Name (in Capital Letter): \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Passport No: \_\_\_\_\_

Validity: \_\_\_\_\_ Nationality: \_\_\_\_\_

Citizen UID No: \_\_\_\_\_

Level	Name of the School	Board	Subjects Studied	Year of Passing	Percentage / Grade
10 <sup>th</sup> Grade					
12 <sup>th</sup> Grade					
Graduation					

### Address for Correspondence:

\_\_\_\_\_  
\_\_\_\_\_

State/ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mobile Number : \_\_\_\_\_ WhatsApp No: \_\_\_\_\_

E-Mail Id: \_\_\_\_\_

### Permanent Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

State/ Country: \_\_\_\_\_ Zip code: \_\_\_\_\_

**Parents Information:**

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Income: \_\_\_\_\_

Income: \_\_\_\_\_

**Total Annual Income of family inclusive of all sources:**

**(In Rupees).** \_\_\_\_\_

**Details of Scholarship sponsoring institute/organization:**

Details of Person/ Organization	Relationship	Contact No	Email Id

**Documents (Self Attested) to be furnished along with this form:**

1. Last Qualifying Exam Marksheet (HSC or Graduation Marksheet, whichever applicable).
2. Copy of the Passport
3. Passport Size Photo
4. Copy of the Citizen UID

**Declaration**

I hereby declare that the above-mentioned information is furnished to the best of my knowledge. If information & declaration is found false, my application shall be summarily rejected.

**\* All the fields above are mandatory.**

Date:

Signature of Applicant

**Note:**

**Submit the completed application in the Registrar Office & send scanned copy of form & all documents on [scholarship@sipu.ac.in](mailto:scholarship@sipu.ac.in)**

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**FOR OFFICE PURPOSE ONLY**

<b>Name of the Candidate:</b>			
<b>Documents Checked and Verified by:</b>			
<b>Signature of the Verifier:</b>			
<b>Remark of the Selection Committee:</b>	<b>Approved</b>		<b>Not Approved</b>
<b>Name &amp; Signature of Committee Member with Date</b>			