
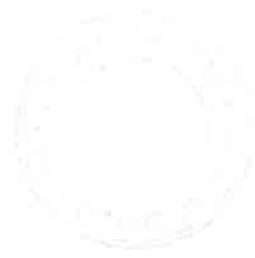


### 5.1.2 Students benefitted by scholarships, free ships provided by the institution/non-government agencies

Sr. No.	Particulars	Academic Year	Amount of Scholarship Provided
1	Free ships provided by the institution	2023-24	359600

  
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Lonavala





## Students List

Sr. No.	Year/ Branch	Eligibility Numbers	Student Name	Concession Amount
1	FE	12023199850	AFTAB AHMED SIDDIQUE (FE MECH)	14050
2	FE	12023199852	BELOSHE ABHIJIT DNYANDEO (FE MECH)	19050
3	FE	12023199826	BHUMBARE PRATIK ANIL (FE COMP)	14050
4	FE	12023199849	LANDGE PRASHANT SATISH (FE MECH)	21050
5	FE	12023199851	PATIL SOMNATH SANJAY (FE MECH)	6000
6	FE	12023199774	PAWAR GHANSHYAM SURESH (FE CIVIL)	14050
7	FE	12023199853	SHAIKH MATIN FAIZ AHMED (FE MECH)	14050
8	FE	12023199854	THORAT RAHUL MURLIDAR (FE MECH)	21050
9	FE	12023199859	TELANGHE AJINKYA ANIL (FE MECH)	14050
10	FE	12023199855	VINAYAK MOTOKAR (FE MECH)	19050
11	SE Comp	12022201563	KOLI NUPUR ARUN-FE	10000
12	TE Civil	12022201554	DHEMBARE PIYUSH TRIMBAK	5000



  
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Lonavala



13	TE Civil	12022201539	MAPARI SANKET SUNIL	15000
14	TE Civil	12022201528	PAWAR AKASH MAHADEV	10000
15	TE Civil	12022201549	SACHCHITANAND MAHAJAN	5000
16	TE Comp	12022201585	SWAMI ROHAN RAJKUMAR	10000
17	TE Mech	12022201643	FULWADE POOJA MARUTI	6050
18	TE Mech	12022201609	GOMARE GOVIND PUNDLIK	10000
19	TE Mech	12022201603	JADHAV JAYANT CHANGDEV	10000
20	TE Mech	12022201644	KADAM SANDESH YASHVANT	5000
21	TE Mech	12022201654	MHATRE SAGAR RAMCHANDRA	15000
22	TE Mech	12022201659	PATIL RITIK GOKUL	5000
23	TE Mech	12022201617	PEDATE GANESH GOVIND	21050
24	TE Mech	12022201658	ROHAN KUMBHAR	15000
25	TE Mech	12022201605	ROHIT KUMAR KUSHWAHA	16050
26	TE Mech	12022201628	SAWANT VINAYAK ANANDA	15000
27	TE Mech	12022201626	SHIRKE SHASHIKANT DHARMRAJ	10000



  
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Lonavala

Approved by AICTE Delhi

Recognized by DTE (6815)

Affiliated to SPPU Pune (CGSP020020)



28	TE Mech	12022201651	SUTAR VISHAL YUVARAJ	5000
29	TE Mech	12022201640	TEJAS NAGNATH KORE	10000
30	BE Mech	12021221972	SATPUTE ABHISHEK GANPAT	5000



*AA*

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Lonavala







COLLEGE OF ENGINEERING & TECHNOLOGY  
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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Ajinkya Anil Telange								
Guardian's Name	Achala A. Telange				Relationship with the Guardian		Mother		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	2	1	1	1	9	9	5		
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
	<input checked="" type="checkbox"/>								
Address details - (Attach Address Proof):									
Permanent Address	Gurudpada, near Kavirgaon, Post bamangaon, Tal - Alibag D - Raigad								
Postal city/town	Alibag				Postcode		402204		
State	Maharashtra				Country		India		
Mobile number	Country code		-91		Number		8788069562		
Personal email address	ajinkyatelange@gmail.com								
Academic Details:									
Name of the Course Enrolled	Mechanical			Year / Semester /Section			P.E		
Father's occupation/Designation (if employed, with Organization detail):									
Mother's occupation/Designation (if employed, with Organization detail):									



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VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*M. Manasa*

Signature of Chairman/Secretary

meritorious/ economically weak/ Girl Child/ Single Parenting.

Mr. / Ms. Ajimiya Telanga student Roll No. \_\_\_\_\_ of \_\_\_\_\_ programme, deserves the concession/Scholarship being batch year \_\_\_\_\_

.....For Office Use.....

Signature

*Achala Telanga*

Parent's Name

Signature

*Ajimiya Telanga*

Students Name

Date

22-4-24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<u>Below ₹ lakh</u>
(Attach proof along with details of each member )	No. of dependents upon earning member	<u>1</u>
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<u>Concession given by college</u>
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/>
	Proof for SC/ST and PH, if applicable	<input type="checkbox"/>
	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details																			
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>																		
Full Name	Vinayak H. Motekar																		
Guardian's Name					Relationship with the Guardian														
Eligibility No	1	2	0	2	3	1	9	9	8	5	5								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	1	0	0	6	1	9	8	4											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
				✓															
Address details - (Attach Address Proof):																			
Permanent Address	Fl. No. 9 PLRH. 12 Sidheshwar Society, 4 Block MIGC																		
Postal city/town	PCMC/PUNE					Postcode	411019												
State	Maharashtra					Country	India												
Mobile number	Country code				Number	9764422868													
Personal email address	motekarvinayak@gmail.com																		
Academic Details:																			
Name of the Course Enrolled	B.E. Mechanical				Year / Semester / Section														
Father's occupation/Designation (if employed, with Organization detail):	Not working																		
Mother's occupation/Designation (if employed, with Organization detail):	House wife																		



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 VPS College of Engineering & Technology  
 Lonavala



Signature of the Principal

*Menele*

Signature of Chairman/Secretary

meritorious/ economically weak/ Girl Child/ Single Parenting.

of \_\_\_\_\_  
 Mr. / Ms. Vinayak H. Norkar student Roll No. \_\_\_\_\_  
 batch year \_\_\_\_\_  
 programme , deserves the concession/Scholarship being

.....For Office Use.....

Signature

H. D. Norkar

Signature

Vinayak Norkar

Date 19/4/2024

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate)
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	Concession given by college
(Give details)	
No. of dependents upon earning member	05
(Attach proof along with details of each member )	
Total family income per month from all sources	35000
(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	



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**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Telas Nagnath KORE								
Guardian's Name	Nagnath Kore				Relationship with the Guardian		Father		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	3	0	5	2	0	0	2	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
	<input checked="" type="checkbox"/>								
Address details - (Attach Address Proof):									
Permanent Address	At Post Borad Tal Mangalwedha, Solapur.								
Postal city/town	Solapur				Postcode		413305		
State	Maharashtra				Country				
Mobile number	Country code		+91		Number		7 057 3 23 693		
Personal email address	telashkore@gmail.com								
Academic Details:									
Name of the Course Enrolled	Mechanical				Year / Semester /Section		2024.		
Father's occupation/Designation (if employed, with Organization detail):	Private Job								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife								



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Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*M. N. Kulkarni*

Mr. / Ms. \_\_\_\_\_ of \_\_\_\_\_ student Roll No. \_\_\_\_\_ batch year \_\_\_\_\_ meritorious/economically weak/Girl Child/Single Parenting.

.....For Office Use.....

Signature

Parent's Name

*M. N. Kulkarni*

Signature

Students Name

*[Signature]*

Date

*20/3/24*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

Other relevant documentary proof Economic status <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	
<i>10,000/- - Given Concession from Institute</i>	
(Give details)	
No. of dependents upon earning member	<i>03</i>
(Attach proof along with details of each member)	
Total family income per month from all sources	<i>Up to 1.5 lakh LPA.</i>
(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details																			
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input checked="" type="checkbox"/>																		
Full Name	Rohan. Shrikant. Kumbhar																		
Guardian's Name	Vinayak S				Relationship with the Guardian		friend.												
Eligibility No	1	2	0	2	2	2	0	1	6	5	8								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	2	8	1	0	2	0	0	3											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
	<input checked="" type="checkbox"/>																		
Address details - (Attach Address Proof):																			
Permanent Address	Gate no. 466 plot no. 26 Jagadguru HSC Talwade pune																		
Postal city/town	Pune				Postcode	411062													
State	Maharashtra				Country	India													
Mobile number	Country code	91		Number	8805990526														
Personal email address	rohan.k.mail@gmail.com																		
Academic Details:																			
Name of the Course Enrolled	Mechanical Engineering			Year / Semester / Section	Third / 6 <sup>th</sup> /														
Father's occupation/Designation (if employed, with Organization detail):	-																		
Mother's occupation/Designation (if employed, with Organization detail):	-																		



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 Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manave*

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use

Parents Name

Signature

*S.S. Kumbhar*

Date *20/03/24*

Students Name

Signature

*S. Kumbhar*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<i>Below 1 lakh LPA</i>
(Attach proof along with details of each member)	No. of dependents upon earning member	<i>5</i>
	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>15,000/- fee concession by Institute</i>
	Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>

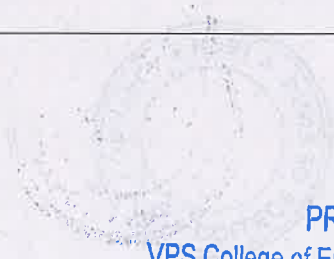




## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Swami Rohan Rajkumar								
Guardian's Name	Swami Ranjeet Rajkumar				Relationship with the Guardian		Brother		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	8	1	2	2	0	0	3	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				✓					
Address details - (Attach Address Proof):									
Permanent Address	New monda road , near Telgane Hospital Udgir , Dist - latur								
Postal city/town	Udgir					Postcode	413517		
State	Maharashtra					Country	India		
Mobile number	Country code				Number	9021626700			
Personal email address	rohanswami985@gmail.com								
Academic Details:									
Name of the Course Enrolled	Computer Engg			Year / Semester /Section			Third year		
Father's occupation/Designation (if employed, with Organization detail):	Photographer								
Mother's occupation/Designation (if employed, with Organization detail):	House wife								



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Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manasa*

Mr. / Ms. Swami Rohan Rajkumar student Roll No. \_\_\_\_\_ batch year \_\_\_\_\_ of \_\_\_\_\_ programme, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use.....

Signature

Parents Name

*Swami Rajkumar*

Signature

Students Name

*Swami Rohan Rajkumar*

Date 18-4-2024

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<i>60,000/-</i>
(Attach proof along with details of each member)	No. of dependents upon earning member	<i>1</i>
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>Concession given by college</i>
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Somnath Sanjay Patil								
Guardian's Name	Sanjay B. Patil				Relationship with the Guardian			father	
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	4	1	1	2	0	0	0	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				✓					
Address details - (Attach Address Proof):									
Permanent Address	Saket tower 'B' wing Room no 207 mhasoba chowk Kalyan East 421306								
Postal city/town	Kalyan (E)					Postcode			
State	Maharashtra					Country			
Mobile number	Country code					Number		9029710517	
Personal email address	Somnath P925@gmail.com								
Academic Details:									
Name of the Course Enrolled	mechanical				Year / Semester /Section			1 <sup>st</sup> year	
Father's occupation/Designation (if employed, with Organization detail):	Self employed. (Driver)								
Mother's occupation/Designation (if employed, with Organization detail):	house wife								



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Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manu*

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use.....

Signature

Parent's Name

*Sansay B. Patil*

Date *20/3/24*

Signature

Students Name

*Samrath S. Patil*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate)
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>concession given by college</i>
No. of dependents upon earning member	<i>2</i>
(Attach proof along with details of each member)	
Total family income per month from all sources	<i>below 1 lakh</i>
(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	



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**Notes :** Please complete this form and return it to office

Applicant Details											
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>										
Full Name	Gomate Govind Pundlik										
Guardian's Name	Pundlik				Relationship with the Guardian		Father				
Eligibility No	1	2	0	2	2	2	0	1	6	0	9
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	1	0	0	2	1	9	8	4			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
	✓										
Address details - (Attach Address Proof):											
Permanent Address	Dewape Hsg soc Jadherwadi, chikhali										
Postal city/town	chikhali					Postcode	411062				
State	maharashtra					Country	India				
Mobile number	Country code				Number						
Personal email address	govind.gomate@gmail.com										
Academic Details:											
Name of the Course Enrolled	mechanical				Year / Semester / Section	TE					
Father's occupation/Designation (if employed, with Organization detail):	Labour										
Mother's occupation/Designation (if employed, with Organization detail):	Housewife										



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 VPS College of Engineering & Technology  
 Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manave*

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ batch year \_\_\_\_\_ meritorious/economically weak/Girl Child/Single Parenting programme, deserves the concession/Scholarship being

For Office Use.....

Parent's Name  
Signature

Students Name  
Signature

*[Handwritten Signature]*

*[Handwritten Signature]*

Date 20103124

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	70,000/-
(Attach proof along with details of each member)	No. of dependents upon earning member	03
	If any Concession/Scholarship etc received in the same Academic Session on Institute level	10,000/- concession Amount given by Institute
	Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input checked="" type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Pooja Mazuti Fulwade								
Guardian's Name	Mazuti				Relationship with the Guardian			father	
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	4	1	0	1	9	9	8	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
	<input checked="" type="checkbox"/>								
Address details - (Attach Address Proof):									
Permanent Address	gaon-khed, Tal-lohara, Dist-Osmanabad.								
Postal city/town	khed.				Postcode				
State	Maharashtra				Country		India		
Mobile number	Country code	91		Number		8805186754			
Personal email address	fulpooja@gmail.com.								
Academic Details:									
Name of the Course Enrolled	Mechanical			Year / Semester /Section			T.E		
Father's occupation/Designation (if employed, with Organization detail):	farmer Labour.								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife.								



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Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Mane*

meritorious/economically weak/Girl Child/Single Parenting.

of \_\_\_\_\_  
 Mr. / Ms. Pooja Fulwade student Roll No. 3309 batch year \_\_\_\_\_  
 programme, deserves the concession/Scholarship being

For Office Use

Signature

Parent's Name

Mani Fulwade

Signature

Students Name

Pooja Fulwade

Date 20/8/2024

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	<u>6000</u>
(Attach proof along with details of each member)	
No. of dependents upon earning member	<u>1</u>
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<u>6050 - Concession amount given by Institute.</u>
Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>





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**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Pratik Anil Bhumbare								
Guardian's Name	Rashmi Bhumbare				Relationship with the Guardian		Sister		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	1	5	0	1	2	0	0	4	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				✓					
Address details - (Attach Address Proof):									
Permanent Address	Dahigaon, Tal - Nandurda, Dist - Buldhana								
Postal city/town						Postcode	443404		
State	Maharashtra					Country	India		
Mobile number	Country code				Number	9420200558			
Personal email address	Pratikbhumbare@gmail.com								
Academic Details:									
Name of the Course Enrolled	Computer Engineering				Year / Semester / Section				
Father's occupation/Designation (if employed, with Organization detail):	Farmer								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife								



*AP*

PRINCIPAL  
VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*Manoj*

Signature of Chairman/Secretary

meritorious/economically weak/Girl Child/Single Parenting.

Mr. / Ms. *Pratik A. Bhumbare* student Roll No. *20* batch year

For Office Use

Signature

*Anil Bhumbare*

Parent's Name

Signature

*Pratik Bhumbare*

Students Name

Date *18-4-2024*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<i>40000/-</i>
(Attach proof along with details of each member)	No. of dependents upon earning member	<i>04</i>
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>concession given by college</i>
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details												
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>											
Full Name	Pawar Akash Mahadev											
Guardian's Name	Mahadev Pawar				Relationship with the Guardian			Father				
Eligibility No												
Date of Birth	D	D	M	M	Y	Y	Y	Y				
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent				
Address details - (Attach Address Proof):												
Permanent Address												
Postal city/town							Postcode					
State							Country					
Mobile number	Country code				Number	9657255809						
Personal email address												
Academic Details:												
Name of the Course Enrolled						Year / Semester /Section						
Father's occupation/Designation (if employed, with Organization detail):												
Mother's occupation/Designation (if employed, with Organization detail):												



**PRINCIPAL**  
 VPS College of Engineering & Technology  
 Lonavala



Signature of the Principal

*Mareena*

Signature of Chairman/Secretary

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use.....

Parent's Name

*[Signature]*

Students Name

*[Signature]*

Date 2-20-24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	Below 1.5 lacs
(Attach proof along with details of each member )	
No. of dependents upon earning member	1
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	Concession given by college
Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate)



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details																			
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input checked="" type="checkbox"/>																		
Full Name	Sawant Vinayak Ananda.																		
Guardian's Name	Rohon Kubhar,				Relationship with the Guardian					Friend.									
Eligibility No	1	2	0	2	2	2	0	1	6	2	8								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	1	9	0	5	2	0	0	3											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
	<input checked="" type="checkbox"/>																		
Address details - (Attach Address Proof):																			
Permanent Address	A/P, Kalmawadi, Tal-walwa, Dist-sangli																		
Postal city/town	Kasegan.				Postcode	415406													
State	Maharashtra				Country	India													
Mobile number	Country code	91		Number	7028243088.														
Personal email address	vinayaksewant167@gmail.com.																		
Academic Details:																			
Name of the Course Enrolled	Mechanical Engineering				Year / Semester /Section	Third/3th.													
Father's occupation/Designation (if employed, with Organization detail):	Farmer																		
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																		



**PRINCIPAL**  
 VPS College of Engineering & Technology  
 Lonavala



Signature of the Principal

*Manave*

Signature of Chairman/Secretary

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use.....

Parent's Name  
Signature

*Manave*

Students Name  
Signature

*Manave*

Date 20/03/2024

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	₹ 30,000
(Attach proof along with details of each member )	No. of dependents upon earning member	5
	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	150001 - Fee concession by Institute
	Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details											
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>										
Full Name	Jadhav Jayant changadev										
Guardian's Name	changadev Jadhav				Relationship with the Guardian		father				
Eligibility No	1	2	0	2	2	2	0	1	6	0	3
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	2	8	0	6	1	1	9	3			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
	<input checked="" type="checkbox"/>										
Address details - (Attach Address Proof):											
Permanent Address	Ganesh Nagar. waker										
Postal city/town	Pune				Postcode	411033					
State	Maharashtra				Country						
Mobile number	Country code				Number	9405602844					
Personal email address	jjadhav383@gmail.com										
Academic Details:											
Name of the Course Enrolled	BE Mechanical			Year / Semester /Section			TE				
Father's occupation/Designation (if employed, with Organization detail):	farmer										
Mother's occupation/Designation (if employed, with Organization detail):	house wife										



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VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manoj*

meritorious/economically weak/Girl Child/Single Parenting.

of \_\_\_\_\_  
 Mr. / Ms. Jayant C. Jadhav student Roll No. 17 batch year \_\_\_\_\_  
 programme, deserves the concession/Scholarship being

For Office Use.....

*21.12.2019*

Parent's Name  
 Signature

Students Name  
 Signature

Date 20.03.24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	80,000
(Attach proof along with details of each member )	No. of dependents upon earning member	1
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	10,000/- Concession by Institute
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/> <input type="checkbox"/>
Merit Achievement certificate, if any (Attach Merit Certificate)	Proof for SC/ST and PH, if applicable	<input type="checkbox"/>





## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details										
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>									
Full Name	Rohit kumar kushwaha									
Guardian's Name	Arun kumar kushwaha				Relationship with the Guardian		father			
Eligibility No	1	2	0	2	2	2	0			
Date of Birth	D	D	M	M	Y	Y	Y	Y		
	1	1	0	7	1	9	9	2		
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent		
				✓						
Address details - (Attach Address Proof):										
Permanent Address	Flat no. 202A ved ashwita patunagar Chikhli									
Postal city/town	Pune				Postcode	411062				
State	Maharashtra				Country	IN				
Mobile number	Country code	+91		Number	91680 58666					
Personal email address	rohitkumar.kushwaha58@gmail.com									
Academic Details:										
Name of the Course Enrolled	mechanical				Year / Semester /Section					
Father's occupation/Designation (if employed, with Organization detail):	Not employed									
Mother's occupation/Designation (if employed, with Organization detail):	House wife									



PRINCIPAL



Signature of the Principal

Signature of Chairman/Secretary

*Manu*

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use

Parent's Name

*Akshay*

Students Name

*Ravi Kumar*

Date *20/03/24*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<i>40,000 Per month</i>
(Attach proof along with details of each member )	No. of dependents upon earning member	<i>3</i>
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>160501- Total concession given by Institute</i>
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	SHERKE SHASHIKANT DHARMRAJ								
Guardian's Name	SHASHIKANT				Relationship with the Guardian		Father		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	2	9	0	7	2	0	0	2	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				<input checked="" type="checkbox"/>					
Address details - (Attach Address Proof):									
Permanent Address	SHANTINAGAR HOUSING SOCIETY, METREVASTI CHIKHLI 411062								
Postal city/town	PUNE				Postcode	411062			
State	MAHARASHTRA				Country	INDIA			
Mobile number	Country code	91		Number	9604560762 / 9325776402				
Personal email address	Shirkesd2002@greecol.com								
Academic Details:									
Name of the Course Enrolled	Mechanical			Year / Semester /Section		2024 / <del>III</del> <sup>IV</sup> rd sem			
Father's occupation/Designation (if employed, with Organization detail):	Private Job								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife								



  
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VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*Manoj*

Signature of Chairman/Secretary

meritorious/economically weak/Girl Child/Single Parenting.

of programme, deserves the concession/Scholarship being

batch year

student Roll No.

For Office Use

Signature

Parent's Name

*Dhyanraj*

Signature

Students Name

*[Signature]*

Date

*20/03/24*

liable for punishment/refund of money with interest, as applicable.

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	<i>Below 2 lakh LPA</i>
(Attach proof along with details of each member)	
No. of dependents upon earning member	<i>3</i>
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>10,000/- concession given by Institute</i>
Other relevant documentary proof	
Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	<input type="checkbox"/>
Merit Achievement certificate, if any (Attach Merit Certificate)	



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details																			
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input checked="" type="checkbox"/> Ms <input type="checkbox"/>																		
Full Name	NUPUR ARUN KOLI																		
Guardian's Name	ARUN				Relationship with the Guardian		FATHER												
Eligibility No	1	2	0	2	2	2	0	1	5	6	3								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	0	5	1	1	2	0	0	4											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	SBC										
			<input checked="" type="checkbox"/>																
Address details - (Attach Address Proof):																			
Permanent Address	104, Redwood Galaxy, Deynagi - Pen, Raigad																		
Postal city/town	PEN				Postcode		402 107												
State	MAHARASHTRA				Country		INDIA												
Mobile number	Country code	91		Number	7249012912														
Personal email address	nupura.koli05@gmail.com																		
Academic Details:																			
Name of the Course Enrolled	BE				Year / Semester /Section			2nd yr											
Father's occupation/Designation (if employed, with Organization detail):	JOB																		
Mother's occupation/Designation (if employed, with Organization detail):	HOUSE WIFE																		



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Lonavala



Signature of the Principal

*Manu*

Signature of Chairman/Secretary

Mt. / Ms. NUPUR A. Koli student Roll No. 09 batch year 2nd yr of computer programme, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use

Signature  
Parent's Name  
*ARUN Koli*

Date 16/04/24

Signature  
Students Name  
*NUPUR Koli*

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	Below 1 lakh
(Attach proof along with details of each member)	No. of dependents upon earning member	4
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	10,000
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/> <input type="checkbox"/>
Proof for SC/ST and PH, if applicable	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>



## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Rihik Gokul Peeti								
Guardian's Name	Gokul				Relationship with the Guardian		Father		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	1	0	3	1	9	9	9	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				✓					
Address details -- (Attach Address Proof):									
Permanent Address	Sagar corner plot no 36, Tapadram colony, Tulgaon station, Pune, Mah.								
Postal city/town	Tulgaon, Pune				Postcode	410507			
State	Maharashtra				Country	India			
Mobile number	Country code	91		Number	9049043400				
Personal email address	rihikpeeti004@gmail.com								
Academic Details:									
Name of the Course Enrolled	mechanical			Year / Semester / Section	T.E				
Father's occupation/Designation (if employed, with Organization detail):	farmer								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife								



PRINCIPAL  
VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manave*

Mr. / Ms. Rithir Pathi student Roll No. 8340 batch year 2019 of IT program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

For Office Use

Students Name Rithir Pathi  
Signature *[Signature]*

Parent's Name Chawal Pathi  
Signature *[Signature]*  
Date 20/12/24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	<u>55000 LPA.</u>
(Attach proof along with details of each member)	
No. of dependents upon earning member	<u>1</u>
	(Give details)
If any Concession/Scholarship etc received in the same Academic Session on Institute level	<u>5000/- fee concession amount by Institute</u>
Other relevant documentary proof	
Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	<input type="checkbox"/>
Merit Achievement certificate, if any (Attach Merit Certificate)	





## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details																			
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>																		
Full Name	Sagor Ramchandra Mhabe																		
Guardian's Name	Ramchandra				Relationship with the Guardian		Father												
Eligibility No	1	2	0	2	2	2	0	1	6	5	4								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	2	5	0	8	1	9	8	8											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
	<input checked="" type="checkbox"/>																		
Address details - (Attach Address Proof):																			
Permanent Address	Flat A-302, Abhang Vishwa Society, Denu alandi road, Chikhali Pune - 411062																		
Postal city/town						Postcode	411062												
State						Country	India												
Mobile number	Country code				Number														
Personal email address	sagormhabe5@gmail.com																		
Academic Details:																			
Name of the Course Enrolled	Mechanical			Year / Semester / Section			Sem-IE												
Father's occupation/Designation (if employed, with Organization detail):	Labour																		
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																		



**PRINCIPAL**  
 VPS College of Engineering & Technology  
 Lonavala



Signature of the Principal

*Manoj*

Signature of Chairman/Secretary

For Office Use.....

Mr. / Ms. \_\_\_\_\_ student Roll No. \_\_\_\_\_ of \_\_\_\_\_ program, deserves the concession/Scholarship being meritorious/economically weak/Girl Child/Single Parenting.

Date 20/03/2024

Parent's Name  
R.R. Mahale

Signature

Students Name  
S.P. Mahale

Signature

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<u>50,000/-</u>
(Attach proof along with details of each member)	No. of dependents upon earning member	<u>1</u>
	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<u>15000/- concession amount by Institute</u>
	Other relevant documentary proof	<p>Merit Achievement certificate, if any (Attach Merit Certificate)</p> <p>Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/></p> <p>Economic status <input type="checkbox"/></p>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Rihik Gokul Patil								
Guardian's Name	Gokul Patil				Relationship with the Guardian		Father		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	1	0	3	1	9	9	9	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
				<input checked="" type="checkbox"/>					
Address details - (Attach Address Proof):									
Permanent Address	Sagar Corner building, Plot no -36 Tapodham colony, Talegaon station								
Postal city/town	Talegaon				Postcode	410-507			
State	Maharashtra				Country	India			
Mobile number	Country code			Number	9049043400				
Personal email address									
Academic Details:									
Name of the Course Enrolled	Mechanical Engg			Year / Semester /Section			Third year		
Father's occupation/Designation (if employed, with Organization detail):	Farmer								
Mother's occupation/Designation (if employed, with Organization detail):	House wife								



*JA*

PRINCIPAL  
VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*Manave*

Signature of Chairman/Secretary

meritorious/economically weak/Girl Child/Single Parenting.

of programme, deserves the concession/Scholarship being

batch year.

Mr. / Ms. *Gokul Puthi* student Roll No. *Rihik Puthi*

For Office Use.....

Signature

*Gokul Puthi*  
Parent's Name

Signature

*Rihik G. Puthi*  
Students Name

Date 18-4-2024

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	<i>55,000/-</i>
(Attach proof along with details of each member)	
No. of dependents upon earning member	<i>1</i>
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>Concession given by college</i>
Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>



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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details											
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>										
Full Name	Rahul Murliidhar Thorat										
Guardian's Name	Murliidhar Thorat				Relationship with the Guardian		Father				
Eligibility No	1	2	0	2	3	1	9	9	8	5	4
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	1	5	0	4	1	9	9	0			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
	<input checked="" type="checkbox"/>										
Address details - (Attach Address Proof):											
Permanent Address	At. Post Manchar, shewalwadi Tal - Ambegaon										
Postal city/town	Pune				Postcode	410503					
State					Country	India					
Mobile number	Country code				Number						
Personal email address	rahul.thorat.rmt@gmail.com										
Academic Details:											
Name of the Course Enrolled	First year Mech			Year / Semester /Section			First Year				
Father's occupation/Designation (if employed, with Organization detail):	Farmer										
Mother's occupation/Designation (if employed, with Organization detail):	Housewife										



*[Signature]*

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VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*Manoj*

Signature of Chairman/Secretary

Mr. / Ms. Rahul M. Thorat student Roll No. \_\_\_\_\_ batch year \_\_\_\_\_  
 of \_\_\_\_\_ programme, deserves the concession/Scholarship being  
 meritorious/economically weak/Girl Child/Single Parenting.

For Office Use.....

Signature

*Murli Dhar Thorat*

Parent's Name

Signature

*Rahul Thorat*

Students Name

Date 19/04/24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

Other relevant documentary proof Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level <u>concession given by college</u>	
(Give details)	
No. of dependents upon earning member <u>5</u>	
(Attach proof along with details of each member)	
Total family income per month from all sources <u>1 lakh per year</u>	
(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	



## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Matin Faiz Ahmed Shaikh								
Guardian's Name	Shabana Faiz Ahmed Shaikh				Relationship with the Guardian		Mother		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
	0	8	0	8	1	9	9	6	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
Address details - (Attach Address Proof):									
Permanent Address	G/502 Nausheen Plaza OPP Kausa Jama Masjid Kausa Mumbai district - Thane								
Postal city/town	Thane				Postcode	400612			
State	Maharashtra				Country	India			
Mobile number	Country code				Number				
Personal email address	Mateen581@gmail.com								
Academic Details:									
Name of the Course Enrolled	Mechanical Engg			Year / Semester /Section			First year		
Father's occupation/Designation (if employed, with Organization detail):	—								
Mother's occupation/Designation (if employed, with Organization detail):	Housewife								



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 Lonavala



Signature of the Principal

Signature of Chairman/Secretary

*Manures*

meritorious/economically weak/Girl Child/Single Parenting.

of \_\_\_\_\_  
 Mr. / Ms. *Mahm Faiz Ahmed Shaikh* Student Roll No. \_\_\_\_\_ batch year \_\_\_\_\_  
 programme, deserves the concession/Scholarship being

.....For Office Use.....

Signature

Parents Name

*Shobana Faiz Ahmed Shaikh*

Signature

Students Name

*Mahm Faiz Ahmed Shaikh*

Date 18/4/24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	Total family income per month from all sources	<i>below 1 lakh</i>
(Attach proof along with details of each member )	No. of dependents upon earning member	<i>3</i>
(Give details)	If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<i>Concession given by college</i>
Other relevant documentary proof	Economic status	<input checked="" type="checkbox"/>
Proof for SC/ST and PH, if applicable	Merit Achievement certificate, if any (Attach Merit Certificate)	<input type="checkbox"/>





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## FEE CONCESSION

**Notes :** Please complete this form and return it to office

Applicant Details									
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>								
Full Name	Mapari sanbet Junil								
Guardian's Name	Junil Mapari				Relationship with the Guardian		father		
Eligibility No									
Date of Birth	D	D	M	M	Y	Y	Y	Y	
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent	
Address details - (Attach Address Proof):									
Permanent Address	Talegaon Dabhade								
Postal city/town	pune				Postcode	411002			
State					Country				
Mobile number	Country code	+91		Number	8 7 6 6 7 6 7 5 5 7				
Personal email address									
Academic Details:									
Name of the Course Enrolled	mechanical				Year / Semester /Section		1 <sup>st</sup>		
Father's occupation/Designation (if employed, with Organization detail):	farmer								
Mother's occupation/Designation (if employed, with Organization detail):	Homemaker								



PRINCIPAL

VPS College of Engineering & Technology  
Lonavala



Signature of the Principal

*Manoj*

Signature of Chairman/Secretary

Mr. / Ms. \_\_\_\_\_ of \_\_\_\_\_ student Roll No. \_\_\_\_\_ batch, year \_\_\_\_\_  
 meritorious/economically weak/Girl Child/Single Parenting.

For Office Use

Parent's Name \_\_\_\_\_  
 Signature \_\_\_\_\_

Students Name \_\_\_\_\_  
 Signature \_\_\_\_\_

Date 02-04-24

I hereby declare that the above facts are correct to the best of my knowledge in case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)	
Total family income per month from all sources	<u>Below 1 lakh</u>
(Attach proof along with details of each member)	
No. of dependents upon earning member	<u>1</u>
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session on Institute level	<u>concession given by college</u>
Other relevant documentary proof	Economic status <input checked="" type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>