

5.1.2. Students benefited by scholarships, free ships provided by the institution/non-government agencies

Sr. No.	Particulars	Academic Year
1	Free ships provided by Institution	2022-2023



STUDENTS LIST

Sr. No.	Year/Branch	Eligibility Numbers	Student Name	Category	Admission Year	CONSESSION AMT
1	BE CIVIL	12020177955	TOMPE SHRIDHAR DILIP	OPEN/EBC	2020-21	30000
2	SE COMP	12021221923	PATIL SHUBHAM VERSHIKET	OPEN/EBC	2021-22	25000
3	SE MECH	12022201643	FULWADE POOJA MARUTI	MGT	2022-23	7050
4	SE MECH	12022201635	GADE AVADHUT ASHOK	MGT	2022-23	17050
5	SE MECH	12022201617	PEDATE GANESH GOVIND	MGT	2022-23	22040
6	SE MECH	12022201655	CHAVAN SURAJ PRAKASH	MGT	2022-23	7050
7	SE MECH	12022201668	DESHPANDE SHRIDHAR ARVIND	MGT	2022-23	7050
8	TE MECH	12021221966	SANADI SHOAIB BALECHAND	EBC	2021-22	5045
9	SE MECH	12022201605	ROHIT KUMAR KUSHWAHA	MGT	2022-23	12050
10	SE MECH	12021221916	KIRAN RAMKISAN TANWADE	MGT	2021-22	25050



FEE CONCESSION FORM

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"/>																		
First name	Suraj				Middle name(s)		Prakash												
Guardian's Name	Prakash Chavan				Relationship with the Guardian		Father												
Enrolment No	1	2	0	2	2	2	0	1	6	5	5								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	1	0	0	9	1	9	8	5											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
	<input checked="" type="checkbox"/>																		
Address details - (Attach Address Proof):																			
Permanent Address	Atria Grande, C708, Behind Handelawn, Handewadi, Pune - 412308																		
Postal city/town	Handewadi				Postcode		412308												
State	Maharashtra				Country		India												
Telephone number	Country code	-			Area/City code	-		Number	-										
Mobile number	Country code	+91			Number	9545334600													
Personal email address	s u r a j p c h a v a n @ g m a i l . c o m																		
Academic Detail																			
Name of the Course Enrolled	Mechanical Engrg				Year / Semester /Section		DSE												
Father's occupation/Designation (if employed, with Organization detail):	Private Job																		
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																		

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached) <input checked="" type="checkbox"/>	
Total family income per month from all sources	
(Attach proof along with details of each member)	
No. of dependents upon earning member	
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Fee concession given by Institute - (Amount - 70501-)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

Date 30/11/2022

P. Chavan
Prakash Chavan
Parent's Name
Signature

Chavan
Suraj Prakash Chavan
Students Name
Signature

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

Mr. / Ms. Suraj Chavan student Roll No. _____ batch year _____
S.E. of Mech. programme, deserves the concession/Scholarship being meritorious/ economically weak/ Girl Child/ Single Parenting.



[Signature]

Signature of the Principal

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

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"/>										
First name	Avadut				Middle name(s)		Ashok.				
Guardian's Name	Ashok Gade				Relationship with the Guardian		Father				
Enrolment No	1	2	0	2	2	2	0	1	6	3	5
Date of Birth ,	D	D	M	M	Y	Y	Y	Y			
	1	4	1	0	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	Ab- Yelwadi , Po . Dehu Tal : Khed Dist . Pune										
Postal city/town	Yelwadi				Postcode		412109				
State	Maharashtra				Country		India				
Telephone number	Country code	-		Area/City code	-		Number	-			
Mobile number	Country code	91		Number	7447632882						
Personal email address	a v a d h u t g a d e @ g m a i l . c o m										
Academic Detail											
Name of the Course Enrolled	Mechanical engg				Year / Semester /Section			DSE			
Father's occupation/Designation (if employed, with Organization detail):	Farmer										
Mother's occupation/Designation (if employed, with Organization detail):	House wife										

(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	1,00,000 (one lakh)
(Attach proof along with details of each member)	
No. of dependents upon earning member	Four members
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Fee concession given by institute (Amount - 17050 - seventeen thousand fifty only)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

Date 27/11/2022

अशोक गडे
Ashok Gade
Parent's Name
Signature

AA Gade
Avadut Ashok Gade
Students Name
Signature

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

Mr. / Ms. AA Avadhut Gade student Roll No. _____ batch year
S.E. of Mech programme, deserves the concession/Scholarship being meritorious/ economically weak/ Girl Child/ Single Parenting.



Signature of the Principal

PRINCIPAL

VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

Notes : Please complete this form and return it to office

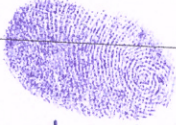
Applicant Details											
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>										
First name	Kiran				Middle name(s)		Ramkiran				
Guardian's Name	Ramkiran Panwade				Relationship with the Guardian		Father				
Enrolment No	1	2	0	2	1	2	2	1	9	1	6
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	0	4	0	6	2	0	0	4			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
				<input checked="" type="checkbox"/>							
Address details - (Attach Address Proof):											
Permanent Address	Wakasi, Lonavala										
Postal city/town	410405				Postcode		410405				
State	Maharashtra				Country		India				
Telephone number	Country code		Area/City code		Number						
Mobile number	Country code		Number								
Personal email address	t a n w a d e k i r a n @ g m a i l . c o m										
Academic Detail											
Name of the Course Enrolled	Mechanical Engg				Year / Semester /Section		FE				
Father's occupation/Designation (if employed, with Organization detail):	Driver										
Mother's occupation/Designation (if employed, with Organization detail):	Peon (VPS engg)										

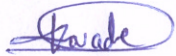
(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached)

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	3
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Fee Concession given by Institute - (Amt 25050)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

Date _____


Dhruvpadabal Tanwade
Parent's Name
Signature


Kiran Tanwade
Students Name
Signature

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

Mr. / Ms. Kiran Tanwade student Roll No. _____ batch year _____
S.E. of Mech. programme, deserves the concession/Scholarship being meritorious/economically weak/ Girl Child/ Single Parenting.



Signature of the Principal

Signature of Chairman/Secretary

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

FEE CONCESSION FORM


Notes : Please complete this form and return it to office

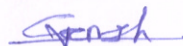
Applicant Details											
Title	Mr <input checked="" type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>										
First name	GIANESH				Middle name(s)		GOVIND				
Guardian's Name	GOVIND PEDATE				Relationship with the Guardian						
Enrolment No	1	2	0	2	2	2	0	1	6	1	7
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	1	5	0	1	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	AT POST CHANDESHWAR , LATUR										
Postal city/town	LATUR				Postcode		413512				
State	MAHARASHTRA				Country		INDIA				
Telephone number	Country code	-		Area/City code	-		Number		-		
Mobile number	Country code	+91		Number		9405858735					
Personal email address	g g n e s h p e d a t e 0 @ g m a i l . c o m										
Academic Detail											
Name of the Course Enrolled	Mechanical Engg.				Year / Semester /Section		1 D S E				
Father's occupation/Designation (if employed, with Organization detail):	Farmer										
Mother's occupation/Designation (if employed, with Organization detail):	Housewife										

(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	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	FEE CONCESSION GIVEN BY INSTITUTE (22040/-) Twenty two thousand only/-
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	NONE

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.

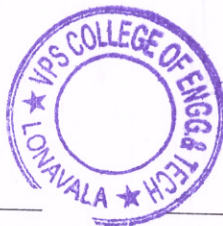
Date _____



Govind Peoate
Parent's Name
Signature


Ganesh Govind Peoate
Students Name
Signature

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

Mr. / Ms. Ganesh - Pedate. student Roll No. _____ batch year
S.E. of Mech. programme, deserves the concession/Scholarship being
meritorious/ economically weak/ Girl Child/ Single Parenting.




Signature of the Principal

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM


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"/>											
First name	Shridhar					Middle name(s)			Dilip			
Guardian's Name	Bhadirathi Tompe					Relationship with the Guardian			Mother			
Enrolment No	1	2	0	2	0	1	7	7	9	8	5	
Date of Birth	D	D	M	M	Y	Y	Y	Y				
	1	7	0	5	2	0	0	0				
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent				
	<input checked="" type="checkbox"/>											
Address details - (Attach Address Proof):												
Permanent Address	Room no. M/B plot no. 02 Chiple Nere New panvel											
Postal city/town	Panvel					Postcode			410206			
State	Maharashtra					Country			India			
Telephone number	Country code	-			Area/City code	-		Number	-			
Mobile number	Country code	+91		Number	8104395475							
Personal email address	shridhar+compel43@gmail.com											
Academic Detail												
Name of the Course Enrolled	Civil Engg					Year / Semester /Section			BE			
Father's occupation/Designation (if employed, with Organization detail):	None (Orphan)											
Mother's occupation/Designation (if employed, with Organization detail):	Housewife											

(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	2 LPA
(Attach proof along with details of each member)	
No. of dependents upon earning member	2
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Concession given by Institute (Amount - 30,000) Thirty thousand
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

Date _____


दिपीप तोपे
Parent's Name
Signature


Shridhar Dipip Tompe
Students Name
Signature

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

Mr. / Ms. Shridhar Tompe student Roll No. _____ batch year
S.E. of Civil. programme, deserves the concession/Scholarship being
meritorious/ economically weak/ Girl Child/ Single Parenting. ✓



Signature of the Principal

Signature of Chairman/Secretary


PRINCIPAL
VPS College of Engineering & Technology
Lonavala

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

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"/>																		
First name	Pooja				Middle name(s)	Maruti													
Guardian's Name					Relationship with the Guardian														
Enrolment No	1	2	0	2	2	2	0	1	6	4	3								
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, District-Osmanabad																		
Postal city/town	Gaon Khed				Postcode	413608													
State	Maharashtra				Country	India													
Telephone number	Country code	+91		Area/City code	413808		Number	8 -											
Mobile number	Country code	+91		Number	8805186754														
Personal email address	fulpooja@gmail.com																		
Academic Detail																			
Name of the Course Enrolled	Mechanical Engg.				Year / Semester /Section	DSE													
Father's occupation/Designation (if employed, with Organization detail):	Works in other's Farm																		
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																		

(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	5
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Concession given from institute level (Rs. 7050 only)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

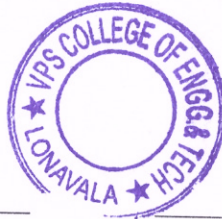
Date 30 Nov 2022

मरुती
मरुती फुलवडे
Parent's Name
Signature

F. Pooja
Pooja Maruti Fulwade
Students Name
Signature

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

Mr. / Ms. Pooja Fulwade student Roll No. — batch year —
S.E. of Mech- programme, deserves the concession/Scholarship being meritorious/ economically weak/ Girl Child/ Single Parenting.



Signature of the Principal

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

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"/>										
First name	Shoaib			Middle name(s)			Balechand				
Guardian's Name	Balechand sanadi			Relationship with the Guardian			father				
Enrolment No	1	2	0	2	1	2	2	1	9	6	6
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	1	8	0	4	2	0	0	0			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
	<input checked="" type="checkbox"/>										
Address details - (Attach Address Proof):											
Permanent Address	Sanadi pathan gadi, Gav nei tal-hatkarangale kolhapur										
Postal city/town	kolhapur			Postcode			403526				
State	maharashtra			Country			India				
Telephone number	Country code	-		Area/City code	-		Number	-			
Mobile number	Country code	+91		Number	9130837863.						
Personal email address	s h o a i b s a n a d i r o @ g m a i l . c o m										
Academic Detail											
Name of the Course Enrolled	Mechanical Engg			Year / Semester /Section							
Father's occupation/Designation (if employed, with Organization detail):	Private Job										
Mother's occupation/Designation (if employed, with Organization detail):	House wife										

(Copy of Income Tax Return / land details / annual estimated income / salary certificate from the organisation to be attached) <input checked="" type="checkbox"/>	
Total family income per month from all sources	
(Attach proof along with details of each member)	
No. of dependents upon earning member	
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Fee concession given by college, Institute level - (50451-) Five thousand fourty five only.
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	

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.

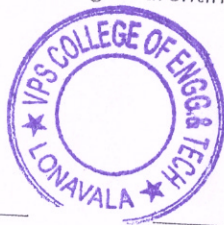
Date 21/7/22

Baleehand Sanadi
Parent's Name
Signature

Shoaib
Students Name
Signature

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

..... / Ms. Shoaib Sandi student Roll No. _____ batch year _____
S.E. of Mech. programme, deserves the concession/Scholarship being meritorious/ economically weak/ Girl Child/ Single Parenting.



[Signature]
Signature of the Principal
PRINCIPAL
VPS College of Engineering & Technology,
Lonavala

[Signature]
Signature of Chairman/Secretary
CHAIRMAN
Governing Council
V.P.Sabha, Pune-5



FEE CONCESSION FORM

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"/>										
First name	Rohit				Middle name(s)		Kumar				
Guardian's Name	Arun Kushwa				Relationship with the Guardian		Father				
Enrolment No	1	2	0	2	2	2	0	1	6	0	5
Date of Birth	D	D	M	M	Y	Y	Y	Y			
	1	7	0	7	1	9	9	2			
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent			
				<input checked="" type="checkbox"/>							
Address details - (Attach Address Proof):											
Permanent Address	Flat No A 202, ved Ashritha patilnagan Chikhli pune 411062										
Postal city/town	Pune				Postcode						
State	Maharashtra				Country		India				
Telephone number	Country code	-		Area/City code	-		Number	-			
Mobile number	Country code	-		Number	9168058666						
Personal email address	R o h i t k u m a r e . k u s h w a h a @ g m a i l . c o m										
Academic Detail											
Name of the Course Enrolled	Mechanical Engg.				Year / Semester /Section		DSE				
Father's occupation/Designation (if employed, with Organization detail):	Private Job										
Mother's occupation/Designation (if employed, with Organization detail):	Housewife										

(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	5
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	fee concession given By Institute (Amt - 120501-)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

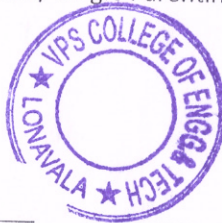
Date 26/11/2022

Arun Kumar
Parent's Name
Signature

Rohit Kumar
Students Name
Signature

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

Mr. / Ms. Rohit Kumar student Roll No. _____ batch year
S.E. of Mech. programme, deserves the concession/Scholarship being
meritorious/ economically weak/ Girl Child/ Single Parenting.



Signature of the Principal

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

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"/>																							
First name	Shubham				Middle name(s)		Veeshiket																	
Guardian's Name	Veeshiket Patil				Relationship with the Guardian																			
Enrolment No	1	2	0	2	1	2	2	1	9	2	3													
Date of Birth	D	D	M	M	Y	Y	Y	Y																
	0	4	0	2	2	0	0	3																
Category	<input checked="" type="checkbox"/> Gen	<input type="checkbox"/> SC	<input type="checkbox"/> ST	<input type="checkbox"/> OBC	<input type="checkbox"/> Minority	<input type="checkbox"/> PH	<input type="checkbox"/> Single Girl Child	<input type="checkbox"/> Single Parent																
	<input checked="" type="checkbox"/>																							
Address details - (Attach Address Proof):																								
Permanent Address	0 Htega dilt Osmanabad																							
Postal city/town	osmanabad				Postcode		413606																	
State	maharashtra				Country		India																	
Telephone number	Country code	-		Area/City code	-		Number		-															
Mobile number	Country code	+91		Number		9372835680																		
Personal email address	1	a	x	a	n	k	a	n	g	a	c	c	o	g	@	g	m	a	i	l	.	c	o	m
Academic Detail																								
Name of the Course Enrolled	Computer Engg				Year / Semester /Section		DSE																	
Father's occupation/Designation (if employed, with Organization detail):	Private Business (Hardware)																							
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																							

(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 LPA
(Attach proof along with details of each member)	
No. of dependents upon earning member	3
(Give details)	
If any Concession/Scholarship etc has been applied for or received in the same Academic Session	Institute level Concession given (Amount 25,000)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

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.

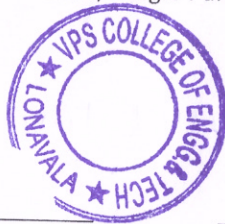
Date 5/9/2022

Veeshiket Patil
Parent's Name
Signature

Shubham Veeshiket Patil
Students Name
Signature

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

Mr. / Ms. Shubham Patil student Roll No. _____ batch year
S.E. of Comp programme, deserves the concession/Scholarship being
meritorious/ economically weak/ Girl Child/ Single Parenting.



Signature of the Principal

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

Signature of Chairman/Secretary

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5

FEE CONCESSION FORM

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"/>																		
First name	SHRIDHAR				Middle name(s)			ARVIND											
Guardian's Name	ARVIND DESH - SHRIDHAR PANDE				Relationship with the Guardian			ARVIND (Father)											
Enrolment No	1	2	0	2	2	2	0	1	6	6	8								
Date of Birth	D	D	M	M	Y	Y	Y	Y											
	0	8	0	3	1	9	8	4											
Category	Gen	SC	ST	OBC	Minority	PH	Single Girl Child	Single Parent											
	<input checked="" type="checkbox"/>																		
Address details - (Attach Address Proof):																			
Permanent Address	FLAN NO A-205 VED Ashritha Near Chaudhari Dhaba, Chikhali																		
Postal city/town	Chikhali				Postcode			411062											
State	Maharashtra				Country			India											
Telephone number	Country code	-			Area/City code	-		Number	-										
Mobile number	Country code	+91			Number	7276099210													
Personal email address	shridhar4702@gmail.com																		
Academic Detail																			
Name of the Course Enrolled	Mechanical engg.				Year / Semester /Section			dse											
Father's occupation/Designation (if employed, with Organization detail):	Private Job																		
Mother's occupation/Designation (if employed, with Organization detail):	Housewife																		

(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	fee concession given by Institute (Amount - 7050 - 7 seven thousand fifty only)
Other relevant documentary proof	Economic status <input type="checkbox"/> Proof for SC/ST and PH, if applicable <input checked="" type="checkbox"/> Merit Achievement certificate, if any (Attach Merit Certificate) <input type="checkbox"/>
Extra Curricular activities if any (Attach proof)	None

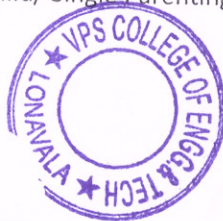
I hereby declare that the above facts are correct to the best of my knowledge In case these are found incorrect I will be liable for punishment/refund of money with interest, as applicable.

Date 29/11/2022
Arvind Deshpande
Parent's Name
Signature

Shridhar Deshpande
Students Name
Signature

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

Mr. / Ms. Shridhar Deshpande student Roll No. _____ batch year
S.E. of Mech programme, deserves the concession/Scholarship being
meritorious/ economically weak/ Girl Child/ Single Parenting.



[Signature]
Signature of the Principal

Signature of Chairman/Secretary

PRINCIPAL
VPS College of Engineering & Technology
Lonavala

CHAIRMAN
Governing Council
V.P.Sabha, Pune-5