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### SCHOOL OF OPEN LEARNING (CAMPUS OF OPEN LEARNING) UNIVERSITY OF DELHI,

SCHOOL OF OPEN LEAKNING

5, Cavalry Lane, Delhi-110 007.

No.SOL/SSS/FC'2004	
Dated	

## Sub: FEE CONCESSION AND BOOKS FROM THE BOOK BANK ACADEMIC SESSION 2004-2005

(For II & III Year Students only)

Dear Student,

You will be happy to note that the School of Open Learning grants fee concession to the poor and deserving students.

If you wish to avail of this concession please fill up the enclosed form and submit it to the School. Your case will be considered only if your total or family income is not more than Rs. 8,000/- per month. The following documents must be attached.

- A Certificate from your employer regarding your monthly income, in case you are employed and that
  the tuition fee is not reimbursed.
- 2. A Certificate from the employer of your father/husband/guardian regarding his/her monthly income and that the tuition fee is not reimbursed.
- 3. If you belong to Scheduled Caste/Tribe/Backward Community, a Certificate to this effect from a gazetted officer. (It may be noted that students belonging to Scheduled Caste/Scheduled Tribes who are employed are not entitled to fee concession.)
- 4. An affidavit on stamp paper (for Rs. 2/-) about the total income of the family from all sources if father/ husband/guardian of the student is not in service.
  - 5. Attested copy of the Marks Sheet of the last examination passed.
  - An attested photocopy of the ration card.

The decision on the application will be communicated to the student in due course.

Please note that full fee concession means exemption from payment/refund of tuition fee only.

The fee concession of those students who show poor performance in their examination is likely to be withdrawn.

The completed form in every respect should be submitted to the Students Service Section (Room No. 12) between 10.00 a.m. and 1.00 p.m. on any working day.

Please note that incomplete applications will not be considered.

Yours Sincerely,

(Prof. H.C. Pokhriyal) Executive Director

#### Important Instructions

- Any false statement on the part of student/guardian in the form would make the student liable to disqualification and disciplinary action.
- 2. Please write your Roll Number allotted by the School office clearly.
  - Applications received after due date will not be considered.

#### List of Committee Members for 2004-2005

Dr. S. C. Garg (Convener), Sh. P. K. Satapathy, Dr. Vijay Bala Tiwari, Dr. S. K. Anand, Mrs. Adity Ganguly, Mrs. Nalini Taneja, Dr. Rama Jain, Mrs. S. P. Wahi, Dr. Rajendra Prasad, Dr. Shubh Laxmi Vats, Sh. Anis Hasan, Dr. S. Manickavasgam, Mrs. Preeti Goel.

### SCHOOL OF OPEN LEARNING (CAMPUS OF OPEN LEARNING) UNIVERSITY OF DELHI,

#### 5, Cavalry Lane, Delhi-110 007. FORM FOR BORROWING BOOKS FROM BOOK BANK ACADEMIC SESSION 2004-2005

1. Name of th	e applicant:	ON CUSTON AND BOOKS	Sub-Fee C
Mr./Miss/M	rs <u></u>	MARKIN MININA	
2. Admission N	lengsonbyov	(Epech & JII Year Sto	Description of
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			despretant stations.
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5. Result of th	ne last examination (attach pl	notocopy of marks sheet).	en and million is a not re Condical strain (no
		Text books are supplied by the	
Sl.No.	Name of the book	Author	Medium
1.		antieden fre concessor i	ion our beyolding sar
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Total Income	Rs	applications will nor by the	The content that incomplete
(As per Incom	ne Certificate)		
Signature (De Students Serv			
	DECIS	ION OF THE COMMITTE	
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Date			Students Welfare Committee
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oll No
Allotted by School of Open Learning
(As per your Identity Card)

# SCHOOL OF OPEN LEARNING (CAMPUS OF OPEN LEARNING) UNIVERSITY OF DELHI, 5, Cavalry Lane, Delhi-110 007.

#### APPLICATION FOR FEE CONCESSION/FINANCIAL AID

1. Name of the student: Mr.	Miss/Mrs				
(in block letters)					
2. Class in which Studying.					
3. Postal Address					
4. Educational Qualification					ð
Last Examination	Board/	Name of the	Year	Division	% of mark
Passed	University	School/College		d boloman	Obtained
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(a) Place of work with full (b) Total Income per mont (Please enclose a certi		m all sources	eer/Guor	ilm t To squitti	
6. Father's Name (If father is	not alive, guardian's				
name and his/her relation					
(a) Full Address					
(b) Occupation and De	signation				
	nddress				
(d) Total income per mo					
from a sources (Pl	ease enclose a certificate	e			97.
from the employer)					

guardian : . Name o.	Age	Relationship with the Stude	Studying in class	Earner/ Non-earner	If Earner, income per month		
			- Topics				
			ASSET				
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				Grand Tota	dir Rs		
Were you granted fee If yes, how much							
We declare that the pa	rticulars	given in this app	nno	of? It employed, y			
Full signature of Father/Guardian				Full Signature of Student			
Date			10 to	per month, includin Da Se a certificate fron	te		
Note: Any	y false sta tent fiabl	atement on the p e to disqualificat	art of student/guion and discipli	aardian in the form nary action.	would make the		
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