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**Satara College of Pharmacy Alumni Association, Satara**

**Scholarship/Research Assistance Application**

Applicant Photo

**[Academic Year 20 - 20 ]**

Applicant Name:

Class:

Gender: M / F Birth Date: DD/MM/YYYY

e-mail ID:

Mobile No.:

Address:

Parent Name: 1) Father- 2) Mother-

Parent Qualification:

Parent Occupation:

Family Income:

* **Academic Information:**

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| **Class** | **Institute** | **University/Board** | **Marks%/CGPA** |
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\* Sequence of information should be SSC to last exam. Also give the information of entrance examinations. Add columns into table if required. Attach supportive documents.

* **Participation in Co-curricular & Extra-curricular Activities:**

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| **Sr.**  **No.** | **Name of Event** | **Level (Institute/District/ State/National/ International)** | **Event Date** | **Venue** | **Participation/**  **Award/**  **Prize** |
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\* Attach supportive documents.

Social Contribution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Contribution willing to give for the development of college.

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For Research Assistance

Title of the project:

Novelty of work:

Expected outcome:

Patentability of work:

The above information provided is best to my knowledge

**Date:**

**Place: Signature**