

*Appl. No.

Aided/SF: Hostel / Day scholar:

Roll No:

Photo

**ARUL ANANDAR COLLEGE (AUTONOMOUS) Karumathur, Madurai DT
JESUIT MAUDRAI PROVINCE Jesuit Education Support (JES)**

Application Form - 2020-2021

I	General Information : (Tick off the relevant one)	
1	Name of the candidate	
2	Gender Male : Female : Transgender :	
3	Date of Birth	
4	Religion HINDU : CHRISTIAN : MUSLIM:	
5	If Catholic:	
	a)	Name of the Diocese
	b)	Name of the Parish
6	Social Group :	
	a)	Dalit Catholic :
	b)	Other Catholic :
	c)	Dalit Christian :
	d)	Other Christian :
7	Community SC / ST : MBC: BC:	
	Mention the Community :	
8	Special Category	
	a) Orphan :	b) Semi Orphan:
	c) Physically Challenged :	d) Others :
	d) First Generation Learner :	
9	Name and Contact information of the Parent:	
	a)	Name:
	b)	Postal Address:
	c)	Mobile No. (student)
10	Bank Details :	
	a)	Name:
	b)	Account No :
	c)	Name of the Bank and Branch
II	Socio-Economic Background of Family (with documents)	
11	Information about family members:	
	a)	Father's Name
	b)	Mother's Name
	c)	No. of Elder Brothers :
	d)	No. of Elder Sisters :
	d)	No. of Younger Brothers:
	e)	No. of Younger Sisters:
12	Ownership of cultivable Land	
	a)	Nothing :
	b)	Less than one acre :
	c)	Less than 3 acres :
	d)	More than 5 acres :
13	Housing Facility	
	a)	Own House (Concrete) :
	b)	Own house (Thatched shed) :
	c)	Rented House :

14	Yearly Income of the Whole Family (in INR)	
	a)	Less than Rs.60,0000-
	c)	Rs. 1,00,001 and 2,00,000-
15	Contact with Jesuits:	
	a)	Jesuit Institution
	b)	Jesuit Parish
If there is any contact with any Jesuit, give references:		
III Details regarding the subsidy applied for		
16	The financial help you need for	
	a)	COLLEGE Fees:
	b)	Hostel Fees:
The Total amount you are applying for :		
17	The amount you are able to pay on your part:	
	a)	COLLEGE Fees:
	b)	Hostel Fees:
18	Other Sources of help:	
	Have you received already or expect to receive financial support from other sources :	
	a)	Yes
	b)	No
	If yes, indicate the source of support :	
	a)	Government
b)	Bank Loan	
c)	Benefactor/friend	
d)	Others	
19	If any help is received or expected, indicate the total amount :	
	a)	Subsidy received , from the Jesuit Management in the previous year, if any :
	b)	Total Amount :
		c) Nil
Signature of the applicant		Signature of the Parent/Guardian
Signature of the Mentor		Signature of the HOD

IV. for Office Use only		
Verification		Signature
1	Deputy Principal	
2	Vice Principal - Shift –I	
3	Coordinator For Dalit Students	
4	Director – Hostel	

V. Sanction Order	
Sanction Amount	Rs.
(Rev. Fr. Rector) Signature of the sanctioning Authority	Signature of the JES Coordinator