

Application to the Deputy Commissioner												
•		assistance			Benefit	under	MLA	Area				
Development Fund (SUHRID), Govt. of Assam.												
1 4 0 .												

GOVERNMENT OF ASSAM	L.A.C:			,	,																		
					(/	Fill alı	field	ds in	BL	OCF	KLE	TTE	ER	S) (Fie	lds r	nark	ed a	s *	are	man	dato	ory)
1.Name of Applicant:*																		L	\perp				
2. Date of Birth:*	′ Y Y Y		3	3.Ger	ıder:	* <u>_</u>]Ma	ale		lFe	ma	ıle			the	er							
4.(a) Guardian's Name.*	· · · · · ·					4((b).(Gua	ırdia	an's	s O	ccu	ра	tion	*								
4.(c) Relationship:*(Tick One) Father / M	other / Spouse / U	Jnc l e / A	unt /	Brothe	er / Si	ster	/ Gı	rand	dfat	ther	- / G	Grar	ndı	noth	nei	· / C	≀the	rs					
(with Applicant) 5. ADDRESS IN FULL: (See Overleaf f	ior Instructions on	Addros	o field	(a)													ſ		_				٦
(a) District :*	or instructions on	(b) Cir	rcle:*	•													٦						
(FOR URBAN AREA)				c. *	(FOR	RUF	RAL	AR	EA)	*						Ш		F	Pho	to*		
(c) Municipality (MC/MB/TC):*(d) Ward :		(e)		<:" ge :			_ (†)	G.I	٦. /	1.5	3:						Ш						
(h) Post Office:		(i) P	olice	Stati	on : _																		
(j) Locality:*						(k)	PIN	1 C	ode	e :* [
6.Caste. [*] □General □ST(P) □ST(H													nit	ty:]Mi	no	rity]Te	a T	rib	es
8.Religion: [*] ☐Hindu ☐Muslim ☐Chr	istian	⊒Budd	hist	∐Ja	in []Ot	her	S	,	9.N	1ob	ile:	*					П					
10.BANK AND PAN DETAILS:																		_					_
(a) Bank Name:*					(b) B	rand	ch:*																-
(c) Branch IFSC : *																							
(d) Account No.:*								T															
(e) Account Holder's Name:*		<u>'</u>				(f) P	'AN	l No	0.:													
11. EDUCATION DETAILS:																							_
(a) Qualification of the Beneficiary:																	_						7
Details of Course for which bene			_	_	_			. –															
(b) Course Type:* ☐HSLC ☐]HSSLC □	UG	∐P(3 [_ ∨o₁	catio	ona	ı L		Dipl	om	a											
(c) Course Name:*																							
(d) Name & Address of the Institu	tion:*																						
(e) Date of Admission into the Cou	ırse:* D D	M	Υ	Υ	Υ																		
12. Whether any Family Member of the	Beneficiary is a	a Gover	rnme	nt Em	ploy	ee:*]YE	S.			NC)										
13. Whether any Govt. Aid is received					-					s) *]YE	S	ı		NO	١						
14.(a) ID Proof Type:*	(b) ID Number:	*			((c) N	lam	ne c	on I	ID :	*												
15. Enrolled in Aadhaar? ☐YES ☐NO						, T	T	T			Ī			Ī			T	T					_)
16. Signature of the Head of t					17. F	<u>∟</u> Reco	mn	ner	nda	tior	1 0	f th	<u>—</u> е І	ML/	-	one	_ cer	 ned	= I w	ith S	 Sea	 *	<u>'</u>
																							_
				Ar	noun	ιι κε	coi	mm	ien	ae	u: <	` —											-
Date:	Seal & Signatur	e of He	ad	Da	ate:										S	eal	<u>&</u> :	Sigr	nat	ure	of I	ML	<u>A</u>
Declaration : (1) I hereby of	leclare that the i	informa	ıtion p	orovio	led a	bov	e is	tru	ıe t	to t	he	bes	st	of n	٦y	kno	owl	edg	je.				
(2) I hereby a	allow the usage	of my A	adha	ar Da	ata fo	or of	ficia	al p	urp	os	es.												
Date*:-																							

https://transdev.assam.gov.in/schemes/suhrid-scheme

Place*:-

Signature of applicant*

eRupantor/SUHRID/EDUCATION/v1

INSTRUCTIONS FOR FILLING UP THE SUHRID FORM FOR EDUCATION BENEFIT

- All Form Fields marked as star (*) are mandatory.
- All Form Fields must be filled in BLOCK LETTERS with a Blue/Black Ballpoint Pen.
- Please refer to the table below for instructions on how to fill some specific fields in the form:

	Details								
For URBAN Area, "Municipal	lity" is a mandatory field.								
[M.C = Municipal Corporation, M.B = Municipality Board, T.C = Town Committee]									
For RURAL Area, "Block" and	d "G.P. / T.B." are mandatory fields.								
[G.P. = Gram Panchayat, T.B. = Traditional Local Body]									
In case of 6 th Schedule Districts, T.B. exists instead of G.P.									
Traditional Local Body can be Autonomous Council Constituency, Autonomous									
District Council, VCDC, Village Development Committee, or Territorial Council.									
Community is optional. Only select an option if the Applicant belongs to one of									
the given communities.									
10-digit Valid and Active Indian Mobile Number (for Contact/SMS Alerts)									
The Bank Account must be in one of the Nationalised Banks or Regional Rural									
Banks or Assam Cooperative Apex Bank.									
In case of Joint Bank Account, the names of both the persons should be filled in									
the field for "Account Holder's Name".									
HSLC ⇔ Class 10									
HSSLC ⇔ Class 11 – 12 / Higher Secondary									
<u>UG</u> ⇔Undergraduate Courses [Eg. BSc, BCom, BA, BTech, BE, BCA, BBA, MBBS, etc.]									
PG \Leftrightarrow Postgraduate Courses [Eg. M.Sc., M.Com, M.A, M.Tech, M.E, M.C.A, M.B.A, etc.]									
<u>Vocational</u> ⇔ Eg. ITI, B.Voc, etc.									
<u>Diploma</u> ⇔ Eg. Certificate Courses, PGDCA, PGDM, etc.									
If the Applicant has receive	ed any Govt. Aid earlier, then the details of the								
Scheme/Head under which the aid was received must be specified in the space									
below point 13.									
List of Documents that serve	e as Valid ID Proof:								
PAN Card	Passport								
9									
Photo ID issued by Recognized Educational Institution									
Certificate of Identity having photo issued by Gazetted Officer									
Address Card having Na	ame and Photo issued by Department of Posts								
	[M.C = Municipal Corporation, For RURAL Area, "Block" and [G.P. = Gram Panchayat, T.B. = In case of 6 th Schedule District Traditional Local Body can District Council, VCDC, Village Community is optional. Only the given communities. 10-digit Valid and Active Indi The Bank Account must be Banks or Assam Cooperative In case of Joint Bank Account the field for "Account Holder HSLC ⇔ Class 10 HSSLC ⇔ Class 11 − 12 / High UG ⇔ Undergraduate Courses Vocational ⇔ Eg. ITI, B.Voc, Diploma ⇔ Eg. Certificate Co If the Applicant has receiv Scheme/Head under which to below point 13. List of Documents that serve PAN Card Voter ID Photo ID issued Certificate of Identity								

GENERAL RULES FOR SUHRID BENEFICIARIES UNDER EDUCATION CATEGORY

- 1. Only one beneficiary may be selected from a particular family in one financial year.
- **2.** Successful students will be eligible to get repeat financial assistance for the entire course period in his/her educational institution, but once only in an academic year.
- **3.** General Category students will be eligible for Vocational education recognized by any Govt. University and Institution recognized under PMKVY.
- **4.** The beneficiary should neither be from the MLA's Family nor his/her relatives nor any Govt. employee or his/her dependents.

(FOR HON'BLE MLA'S RECORD)

Financial Assistance for Education Benefit under MLA Area Development Fund (SUHRID), Govt. of Ass	<u>sam</u>
Beneficiary's Name:	
Guardian's Name:	
Relationship with Beneficiary: (Tick One)	
Father / Mother / Spouse / Uncle / Aunt / Brother / Sister / Grandfather / Grandmother / Ot	hers
Address:	
Institute's Name & Address	
Course Name:	
Amount Recommended: ₹	
Date of Recommendation:	