

Application Type

☐ New Applicant

☐ Renewal



**The EMPower
Foundation**

Education • Motivation • Passion

Applicant Photo

APPLICATION FORM

Name of Applicant (First name, Surname) : _____

Date of Birth : _____ Address of Applicant: _____

Applicant's Contact Telephone No: _____

Applicant's Email ID If Any : _____

Name of Parent or Guardian: _____

Contact No. of Parent or Guardian: _____

Monthly Income of Parents : _____

Name & Address of School or College currently Attending: _____

Course and Year Currently Attending : _____

Course Planning to Attend Next Year : _____

Recommending Individual Name & Telephone No: _____

Other Scholarship and Funds received and amount: _____

Describe your goals & dreams : _____

Signature of Applicant : _____ Date : _____

*Please mail completed application on or before **December 15th, 2020** to the address below:*

Parvathy Chandrasekhar, 20, Lakshmi Apartments, Pallath Lane East, Punnamm, Thrissur - 680 002.

Tel: 984-778-2889 | www.ourshakthi.charity | ourshakthi@gmail.com

For Office Use Only :

Reviewed by : _____ Approved : _____ Pending: _____

Declined: _____ Remarks: _____



Instructions to Applicant

FOR RETURNING STUDENTS:

- 1). Please check the "RENEWAL" box.
- 2). Attach self-attested copy of the Applicant's SSLC book 1st page (Personal information details).
- 3). Kindly fill the entire application, sign and date before posting the forms to the address provided.

FOR NEW APPLICANT:

Please check the "NEW APPLICANT" box.

Please attach self-attested copies of items 1-3 below:

- 1). Applicant's SSLC book 1st page (Personal information details)
- 2). Applicant's Aadhar card.
- 3). Parent Aadhar card.
- 4). Kindly fill the entire application, Attach photo, Sign and Date before posting the forms to the address provided.