



**PH.D.IN STATISTICS
SCHOLARSHIP APPLICATION FORM**

1. Applied for the Academic year _____

2. Personal Information

Name of the Student _____

First name

Middle name

Last name

Application No. _____

Nationality _____

Gender

M

F

Date of Birth _____ (dd/mm/yyyy)

Mobile No _____

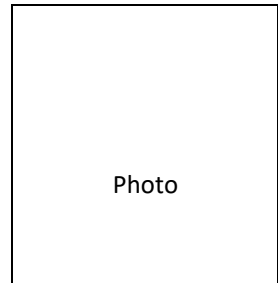
Email _____

Current Address:

Permanent Address:

3. Any previous publication/s _____

4. Justification to the need of the Scholarship _____



Note:

1. Scholarships are awarded on a yearly basis, once you are awarded with the scholarship it will be continued throughout the program.
2. Application must be received along with the admission form. Scholarship recipients will be notified by email of the scholarship committee's decision.
3. The scholarship will stand cancelled immediately if a student is found indulging in any wrong activity.
4. A student will not be entitled to avail the scholarship in case of re-admission.

Hereby, I certify that the information on this application is true to the best of my knowledge. I have read the above and will try to do best of my efforts.

Date

Signature of the student

Approved by:

Dean

PVC

VC