



**Government of Goa**  
**DIRECTORATE OF TRIBAL WELFARE**  
**Panaji-Goa**

**Application for the Bhagwan Birsa Munda Lakshya Siddhi Yojana for Scheduled Tribes Students for the Year \_\_\_\_\_**

**[Part –A [To be filled by Applicant]**

Affix a self-  
attested  
Passport size  
Photograph

**1. Full Name: (in block Letters)**

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Date of Birth (dd/mm/yyyy) \_\_\_\_\_ Gender: \_\_\_\_\_

**2. Address for Correspondence:**

House No.: \_\_\_\_\_

Waddo/Street: \_\_\_\_\_

City/Town/Village: \_\_\_\_\_

Name of Village

Panchayat/Municipality: \_\_\_\_\_

Taluka \_\_\_\_\_ District: \_\_\_\_\_ District Code: \_\_\_\_\_

Assembly Constituency: \_\_\_\_\_

State : GOA Pin Code: \_\_\_\_\_

Telephone /Mobile No. \_\_\_\_\_

E-mail: \_\_\_\_\_

**3. Religion:** Hindu/ Christian

**4. Scheduled Tribe Community:** Gawda/Kunbi/Velip

**5. ST Certificate No:** \_\_\_\_\_ **Date** \_\_\_\_\_

**6. Aadhaar No:** \_\_\_\_\_ **Aadhar seeded(Y/N)** \_\_\_\_\_

**7. Annual Income:** \_\_\_\_\_

## 8. Declaration:

- i. I hereby declare that the information given above is correct.
- ii. I hereby declare that I shall not drop out of the course in the middle and in case of drop out then I shall refund back the entire amount received under “*Bhagwan Birsa Munda Lakshya Siddhi Yojana* ” to the Directorate of Tribal Welfare before the end of Academic year.
- iii. I shall abide by the terms and conditions of sanction of the “*Bhagwan Birsa Munda Lakshya Siddhi Yojana* ”.
- iv. I declared that I am aware of the fact that, if at any stage, it is found to the satisfaction of the sanctioning authority that the information given by me is false or if I violate the terms and conditions of the scheme, the assistance sanctioned to me, may be cancelled and the entire amount of assistance will be refunded by me or may be recovered from me.
- v. I hereby declare that i have not availed/will not avail any other coaching scheme of the State Government or Central Government.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the student

Place: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Parent/ Guardian

## Consent Form

I, \_\_\_\_\_ Holder of Aadhar No. \_\_\_\_\_ hereby give my consent to Directorate of Tribal Welfare, Panaji, Government of Goa, for using my Aadhar number to establish and authenticate my identity under \_\_\_\_\_ Scheme.

## 9. Details of Course for which assistance is being sought:

( i ) Name of Course: \_\_\_\_\_

( ii ) Duration of Course: \_\_\_\_\_

(iii) Month/Year : \_\_\_\_\_

(iv) Name of the Coaching Institution preferred:

**10. Details of Bank Account of Student:**

(i) Name of the Payee (as in the Bank Account ): \_\_\_\_\_

\_\_\_\_\_

(ii) Name of the Bank: \_\_\_\_\_

\_\_\_\_\_

(iii) Bank Branch (Full Address): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(iv) Bank Account Number: \_\_\_\_\_

(In Words): \_\_\_\_\_

(15 digit A/C number): 

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(v) MICR Code of the Bank: \_\_\_\_\_

(VI) IFSC Code: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Student)

Name:

Date:

**Document enclosed with the Application:**

- I. Passport Size Photograph.
- II. Self attested copy of SSCE Marksheet of the Student.
- III. Self attested copy of Aadhaar card of the student issued by competent authority.
- IV. Self attested copy of Scheduled Tribe Certificate of the student issued by competent authority.
- V. Bank Mandate form along with account details of the student/Self attested copy of Bank Pass Book.
- VI. Identity Card issued by the institute to the student.
- VII. Fee structure of the courses offered by the coaching institute.
- VIII. Certificate of registration issued to the coaching institute by competent authorities.
- IX. Income Certificate.

**Annexure – B**

**[To be filled by the Head of the Coaching Institute]**

**1. Details of Coaching Institute:**

Name of Coaching Institute, where admitted with address:

Name: \_\_\_\_\_

Locality: \_\_\_\_\_

Waddo/Street: \_\_\_\_\_

City/Town/Village: \_\_\_\_\_

Taluka : \_\_\_\_\_ District: \_\_\_\_\_

State : \_\_\_\_\_ Pin Code: \_\_\_\_\_

Telephone : \_\_\_\_\_ Fax : \_\_\_\_\_

Registration No : \_\_\_\_\_

E-mail : \_\_\_\_\_

Website : \_\_\_\_\_

**2. Verification/Information/strictly to be furnished only by the Head of Coaching Institute compulsorily:**

1. It is certified that the Shri /Kumari \_\_\_\_\_ s/o/d/o/Shri. \_\_\_\_\_

is admitted in \_\_\_\_\_ Course for the academic year \_\_\_\_\_ in this institute is correct /has been corrected in red ink.

2. In case the applicant leaves the institution or otherwise discontinues the coaching or accepts any other assistance, the fact will be immediately reported to the Directorate of Tribal Welfare so that payment of assistance to the applicant is discontinued and also recover the financial assistance already released.

Place:

Date:

Seal of Institution

\_\_\_\_\_  
Signature of the Head of the  
Coaching Institute with Official Seal