



# Ohmkaram Scholarship Application Form

**Deadline to submit application: July 31, 2024**

*(Proposed award is to cover Tuition and Books to a maximum of USD 700)*

Eligibility:

1. Student should be domiciled in Kerala.
2. Student should attend a professional course of any year.
3. Student should be enrolled in any institute in India.
4. Scholarship will be awarded to a student only once.

Instructions:

1. Please complete clearly the following information, print it, scan it and send it along with all necessary documents and applicable signatures as email attachments to: [info@ohmkaram.org](mailto:info@ohmkaram.org).
2. If this form is incomplete, inaccurate, or unsigned, it will not be considered.
3. Attach a copy of latest mark or grade sheet.
4. Attach a letter from the Village Officer, Head of Corporation or Municipality verifying the family income stated below.
5. Two References:
  - I. Current educational institution principal/HOD:  
Name.....: \_\_\_\_\_  
Designation/Title: \_\_\_\_\_  
Phone Number.: \_\_\_\_\_  
Address.....: \_\_\_\_\_
  - II. Prominent local personality unrelated to you (Panchayath member/Counselor/MLA/MP etc.):  
Name.....: \_\_\_\_\_  
Designation/Title.....: \_\_\_\_\_  
Phone Number.....: \_\_\_\_\_  
Residential Address: \_\_\_\_\_
6. Write an essay of about 300 words:
  - I. About yourself.
  - II. Educational and career goals
  - III. Why did you choose this particular professional course?
  - IV. What are the reasons to apply for Ohmkaram scholarship?
7. Attach a statement for the cost of Tuition and Books.

Personal Information:

Applicant's Name.: \_\_\_\_\_  
Home Address.....: \_\_\_\_\_  
Phone Number.....: \_\_\_\_\_ E-mail Address.....: \_\_\_\_\_  
Pan Card Number: \_\_\_\_\_ Aadhar Card Number: \_\_\_\_\_



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## Family Income Information:

Annual Income of Father.....: \_\_\_\_\_  
Annual Income of Mother.....: \_\_\_\_\_  
Total Annual Income of Father and Mother.....: \_\_\_\_\_  
Annual Income of Applicant.....: \_\_\_\_\_  
Annual Income of Spouse (If Applicable).....: \_\_\_\_\_  
Total Annual Income of Applicant & Spouse.....: \_\_\_\_\_  
Other Income (Agriculture, Business, Investment):. \_\_\_\_\_  
Total Annual Income of Family.....: \_\_\_\_\_

## Academic Information:

College/Institution enrolled in.....: \_\_\_\_\_  
Address of the College/Institution enrolled in....: \_\_\_\_\_  
Number of years or credits completed.....: \_\_\_\_\_  
Percentage of Marks or Grades obtained .....: \_\_\_\_\_

## Nepotism Statement:

Are you related to any member of Ohmkaram Executive Committee or Board of Directors (Please circle the applicable choice):        Yes        No

If yes, please identify the member of the Executive Committee or the Board of Directors and the relationship:

\_\_\_\_\_

## Authorization Information:

\_\_\_\_\_  
(initial) I release to Ohmkaram the right to access all my current and ongoing personal and academic records and transcripts. If awarded a scholarship, I understand that I must meet the scholarship criteria and Standards of Academic Progress as per Ohmkaram rules.

\_\_\_\_\_  
(initial) I understand that my name and information from my academic history may be released to the Scholarship Selection Committee and the Scholarship Donors. If awarded a scholarship, I release to Ohmkaram, the right to use my name, story and picture for printed and video materials, reports and press releases without any compensation. I also recognize the advisability of communicating a letter of thanks to the donor(s) of the scholarship.

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee(s) and scholarship donor(s).

Student Signature: \_\_\_\_\_

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