

## **Befriend Life Foundation**

#A207, Aristocrat Apartment, Kasturinagar 1st Main, East of NGEF Layout, Bangalore - 560043 E: info@befriendlife.com; Web: www.befriendlife.com

M:+91 9958603399

#### PROJECT PRAGYA: EDUCATIONAL SCHOLARSHIP APPLICATION FORM

PERSONAL INFORMATION	
Full Name	
Complete Address	
Phone Number	
Email	
Current Education:	
☐ High school ☐ Undergraduate ☐ Graduate	Photo
ACADEMIC COURSE YOU INTEND TO JOIN	
Field of study	
Institute Name	
Location (District & State)	
Website of Institute	
Contact Name & details	
Fees Amount	
Fees Payment Schedule:	
☐ Monthly ☐ Quarterly ☐ Yearly ☐ Semester wise	
FAMILY BACKGROUND	
Father's Name	
Mother's Name	
Father's employment	
Mother's employment	
Siblings: No	
Sibling(s) name(s):	



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1.	What are your academic and	I career goals?
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2. How will this scholarship help you achieve your goals?

#### **ADDITIONAL REQUIREMENTS**

#### Please attach:

- 1. Copy of marksheets of previous semesters/years
- 2. A letter of recommendation from a teacher or mentor
- 3. Other documents (example: proof of financial need Bank Statement)

### **SELF DECLARATION**

I certify that the information provided is accurat	e and true.
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Date:

Signature: