



MORAN AUTONOMOUS COUNCIL

Higher Education Support Program

One-Time Financial Assistance to students of Moran Community for pursuing higher education belonging to economically backward family

FY-2024-25

Application Form



1. Applicant Details

- Full Name (in block letters): _____
- Date of Birth: ____ / ____ / ____
- Gender: Male Female Other
- Father's/Mother's/Guardian's Name: _____
- Address for Correspondence: _____

- Contact Number: _____
- Email ID (if any): _____

2. Academic Details

- Name of Institution: _____
- Course Enrolled: _____ Year: _____
- Duration of Course: _____
- Enrollment/Student ID Number: _____

3. Financial Information

- Annual Family Income (in ₹): _____
(Must be ₹3.00 lakh or less)
- Source of Family Income: _____
- Are you receiving any other scholarship/financial aid? Yes No
If yes, provide details: _____

4. Bank Details (For Direct Transfer of Assistance)

- Name of Account Holder: _____
- Bank Name: _____
- Branch Name: _____
- Account Number: _____
- IFSC Code: _____

5. Documents to be Enclosed (Self-attested copies)

- Income Certificate issued by Competent Authority
- Admission Receipt
- Bank Passbook (First Page)
- Aadhaar Card or other valid ID proof
- Caste Certificate

Terms and Conditions

1. The Higher Education Support Program provides a one-time financial assistance of ₹10,000.00 to eligible students to support their educational expenses, including tuition fees, books, study materials, and other related costs.
2. The assistance is available only to financially weak students whose annual family income is ₹3.00 lakh or less, and who are currently enrolled in:

- Graduate-level professional courses (e.g., Engineering, Medicine, Law, Architecture, Pharmacy etc.).
 - Postgraduate programs in any discipline (e.g., MA, MSc, M.Com, MBA, M.Tech).
 - Ph.D. programs in any discipline.
3. Applicants must provide valid proof of enrollment and an income certificate issued by a competent authority confirming the income threshold.
 4. The assistance is strictly one-time and non-transferable.
 5. Students receiving other government scholarships or financial aid for the same purpose are not eligible.
 6. The authority reserves the right to shortlist beneficiaries based on the merit of the candidates.
 7. Complete applications with all documents must be submitted by 30th July 2025. Late or incomplete forms will be rejected.
 8. The application may be submitted through concerned member of Moran Autonomous Council or at the O/o the Moran Autonomous Council, Tinsukia.
 9. False information or documents will result in disqualification and legal action.

Declaration by the Applicant

I hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that any false information will lead to cancellation of my application and possible legal action.

Signature of Applicant
Date: ____ / ____ / 2025

For Office Use Only:

Application Received on: ____ / ____ / 2025

Recommended by: _____ (CEM/ Chairman/ Dy. Chairman/
Dy. CEM/ Executive Member/ General Member, Moran Autonomous Council)

Verified: Yes No

Remarks: _____