



KOVAI KALAIMAGAL EDUCATIONAL TRUST

(KKCAS)



Vellimalaipattinam, Narasipuram Post, Thondamuthur Via, Coimbatore - 641 10
Ph: 0422 – 2970131 / 132, Fax: 0422 – 2970427, 9500564940

Application for Sports Scholarship 20 ----- - 20 -----

Date: _____

From

To

The Trustees
Kovai Kalaimagal Educational Trust
Vellimalaipattinam, Narasipuram Post
Thondamuthur (via), Coimbatore -641109.

Sir,

Sub: Application for getting Sports Scholarship for the years 20 - 20 – Reg.

I _____ joined _____

in our college (KKCAS) during the 20 - 20 .I am enclosing herewith the filled in scholarship application form for your kind consideration. I request you to kindly consider my application and sanction the Sports Scholarship amount so that it will helpful to me for my higher studies.

Scholarship Category:

S.No.	Level of Sports	Scholarship % (Please Tick)			
		Individual Event		Group Event	
1	State Level	100%		50%	
2	District Level	50%		25%	

Thanking you,

Yours faithfully,



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Application for Sports Scholarship (20 ----- - 20 -----)

Date: _____

1. Name of the Student : _____
2. Class : _____
3. Batch : _____
4. Gender : _____
5. Name of the School Studied : _____
6. Address : _____

7. Contact Number : _____
8. Name of the Sport /Games : _____ (Runner/Winner)
9. Level : State / District & Event : Individual / Group

DECLARATION

I declare that the above information are correct to the best of my knowledge.

Signature of the Student

OFFICE USE

Level		Event		% of Scholarship Sanctioned	Tuition Fee / Semester	Amount of Scholarship Sanctioned
State	District	Individual	Group			

Admission In charge

PD

OS

Principal

Trustee

Trustee

Secretary