

**ANNEXURE - I**

**PROFORMA FOR ESCORT CERTIFICATE IN CONNECTION WITH "SAHANUBHUTI"  
SCHOLARSHIP FOR THE YEAR 2024-2025**

Affix recent passport size attested photo of the student/applicant

Full Name

Affix recent passport size attested photo of the Escort

Full Name

Certified that \_\_\_\_\_ (name of the escort)  
residing at \_\_\_\_\_  
\_\_\_\_\_ (full address along with contact no.) is  
Escorting \_\_\_\_\_ (name of the student) from  
his/her resident \_\_\_\_\_ to \_\_\_\_\_  
\_\_\_\_\_ (name of the institution) from  
\_\_\_\_/\_\_\_\_/\_\_\_\_ (date) for continue his/her studies.

I hereby certify that the above made statements are true to the best of my knowledge and belief.

Signature of the H.O.I. \_\_\_\_\_

Designation: \_\_\_\_\_

Seal: \_\_\_\_\_

\*Copy of the Aadhaar card/ Voter I-card/ Pan Card & Residential certificate of the Escort are to be submitted along with this certificate.

# Students having 75% & above disabilities and obtaining certificate from competent Medical Authority regarding necessity of Escort only eligible to apply for this benefit.