

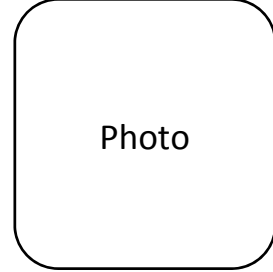


ALL INDIA VEERASHAIVA MAHASABHA (R.), BENGALURU

APPLICATION FOR PRATHIBHA PURASKARA-2016-17

To,

All India Veerashaiva Mahasabha(R.)
No.17/4, 'Veerashaiva-Lingayath Bhavan',
Bellary Road, Sadashivanagar, **Bengaluru-560 080**
Karnataka State, Ph: 080-23618400
e-mail: info@veerashaivamahasabha.com
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1	Student Name			
2	Father's Name			
3	Mother's Name			
4	Postal Address			
5	Date of Birth			
6	School / College Name			
7	Register No.			
8	SSLC / 2nd PUC Marks Card (Enclosed)	Total Marks	Marks Obtained	Percentage
9	Income and Caste Certificate (Enclosed)			
10	Ph No / Mob No / E-mail			

Certified that the above information is correct to the best of my knowledge.

Parents Signature

Date:

Student Signature

Date: