



KERALA STATE CIVIL SERVICE ACADEMY

[Estd. Under Centre for Continuing Education Kerala]

Anathara Lane, Charachira, Kowdiar P.O.,

Thiruvananthapuram 695 003

Phone : 0471-2311654, 2313065

Affix Passport
size
Photograph

**Financial Assistance for the Civil Service Prelims cum Mains Examination coaching for the Economically Weaker Students
(2023-2024)**

Application Form

1. Name of Applicant :
(In Capital Letters)

2. Religion & Caste (also specify whether availing fee
concession under SC/ST/Minority category)/
receiving Scholarship from other department :

3. Date of Birth :

4. Qualification :

5. Residential Address [In Capital Letters] with
Land Phone/Mobile Number and
Email Id :

6. Address for Communication
[In Capital Letters] :

7. Name of Father/Mother/ or Guardian
[with profession] :

8. Batch of 2023-2024 (PCM) [put ✓ mark] : June September

9. Name of Institution : Kerala State Civil Service Academy
Thiruvananthapuram / Kollam / Aluva / Palakkad / ICSR
Ponnani / Kozhikode / Kalliassery

Fee Remittance Details :

10. A copy of e-receipt should be enclosed with the application : Receipt No : Date :

P.T.O

	Bank Account Details of Student	:	
11.	1. Bank Name	:	
	2. Branch	:	
	3. Account Number	:	
	4. IFSC Code	:	
	(A copy of Bank Pass book should be attached)		

12.	Marital Status	:	Single / Married
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13.	Annual Family Income (Rs.)	:	
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Declaration

I (Name of Applicant) hereby certify that the details given above are true to the best of my knowledge and belief. In the event of any information being found false or incorrect or being detected on or after the selection, I understand that my selection is liable to be cancelled and I shall be subjected to such further action as may be provided under the law and or rules. I also certify that I have not availed scholarship/freeship from any agency of Government of Kerala, for Civil Service coaching course during 2023-2024.

Place :

Signature of Applicant

Date :

with Date

Details to be Enclosed

- NB :**
- (a) Income Certificate (in original) from Village Officer concerned
 - (b) Self attested copies of SSLC or equivalent certificate proving Date of Birth
 - (c) Copy of Bank Pass Book (Facing Sheet only)
 - (d) Fee receipt.

ONLY FOR OFFICE USE [Co-ordinators]

Name of Candidate :

Date of Birth :

Annual Family Income :

Name of Course (Batch) :

Name of Centre :

Remarks

Checked By :

Supervised By :

Approved by (Co-ordinator with Signature) :