

Annexure-I: Affidavit from Applicant to avail Orphan Child Scholarship

(On stamp paper of Rs. 100/-)

I _____ S/D/O Mr. _____

R/O _____

City _____, District _____, State _____.

do hereby solemnly state & affirm as under:

1. That I am a citizen of India and a permanent resident of the address mentioned above.
2. That both of my parents (father and mother) are dead, and I am not legally adopted.
3. That I would like to take admission in _____ (programme name) and apply for scholarship benefits of Orphan Child Scholarship offered by Galgotias University for the session 2026-27.
4. That I am currently residing with Mr./Ms. _____ who is my _____ (relation) and has _____ number of dependents (including applicant) with annual income for financial year 2026-27 of Rs. _____ from all sources.
5. That I am not availing any other Government/ State/ National scholarship for the session 2026.
6. That I will be required to pay fees or bear the expenses for all facilities availed by me.
7. That I will abide by all the terms and conditions of Galgotias University either mentioned in prospectus or other documents such as Admission Scholarship Policy for Orphan Students etc.

Deponent
(Signature with date)

Verification

I do hereby declare that all the information either mentioned above or in enclosed documents are true & correct to the best of my knowledge and nothing has been concealed therein. I very well know the fact that if any information is found to be false & incorrect then I will be liable to be punished under Law in Force and any benefits received by me will be liable to be ceased.

Place: _____

Deponent
(Signature and Date)

The document must be duly signed and stamped from the executive magistrate

Applicants not living in the government approved orphanage must submit this affidavit/ Not legally adopted/ Is an abandoned child (*No information of parents or relative available*).

Annexure-II: Affidavit from Guardian for Financial Aid to Orphans (on stamp paper of Rs. 100/-)

I _____ S/D/o Shri _____
R/O _____
City _____, District _____, State _____
Guardian of _____ (Applicant's Name) Application/Admission
Number _____ do hereby solemnly state & affirm as under:

1. That I am a citizen of India and permanent resident of the address mentioned above and applicant's full address is

2. That both parents (father and mother) of the applicant are dead, and the applicant is not legally adopted.
3. That applicant would like to take admission in _____ (programme name) and apply for benefits of financial aid to orphans' scheme offered by Galgotias University for the session 2026.
4. That applicant is currently residing with Mr./Ms. _____ who is his/her _____ (relation) and has _____ number of dependent (including applicant) with annual income of Rs. _____ from all sources.
5. That applicant is not availing any other Government/ State/ National scholarship for the session 2026.
6. That applicant or his/her guardian will be required to pay fees or bear the expenses for all facilities availed by him/ her.
7. That applicant will abide by all the terms and conditions of Galgotias University either mentioned in prospectus or other documents such as Financial Aid to Orphans.

Deponent
(Signature with date)

Verification:

I do hereby declare that all the information either mentioned above or in enclosed documents are true & correct to the best of my knowledge and nothing has been concealed therein. I very well know the fact that if any information is found to be false & incorrect then the applicant will be liable to be punished under Law in Force and any benefits received by the applicant will be liable to be ceased.

Place: _____

Deponent
(Signature and Date)

The document must be duly signed and stamped from the executive magistrate

Applicants not living in the government approved orphanage must submit this affidavit/ Not legally adopted/ Is an abandoned child (No information of parents or relatives available).