



भारतीय प्रबंध संस्थान इंदौर

Indian Institute of Management Indore Need Based Financial Application (NBFA) for AY 2024-25

PART I – Personal information of the Applicant

Application No. (for Office use only)	
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The applicants for Need-based Financial Assistance (NBFA) are advised to ensure that the information given by them in this form are correct and factual.

If it is discovered at a later date that false /incorrect information was provided by the applicant, it will lead to disciplinary action.

The Institute would use the information provided here only for the stated purpose and it will be held in strict confidence.

The Institute reserves the right to reject any application without assigning any reason.

Please go through the instruction sheet before filling the information in this application form. The instruction sheet is provided at the end of the application form.

Part I – Personal Information of the Applicant (To be filled in and signed by the Applicant)

Personal Information of the Applicant:

- Name in BLOCK letters _____ Roll Number _____
- Programme: PGP-I/ PGP-II/ IPM-V/IPM-IV/IPM-III/ IPM-II/IPM-I/ PGP HRM-I/ PGPHRM-II
- Present Address:

- Permanent Address:

- Contact Details: Mobile: _____ Email: _____
- Date of Birth: Day _____ Month _____ Year _____
- Marital Status: Married _____ Unmarried _____ No. of dependents of applicant _____
- If you are married, please provide the following details:
 - Name of your spouse _____
 - Was your spouse employed during financial year 2023-24? _____
 - Is your spouse employed at present? _____
- Number of siblings: _____

10. If you have been employed in the past, list the positions you have held:

Position	Name of the Organization	Period		Gross Monthly Salary	Gross Yearly Salary
		From	To	Rs.	Rs

(Please enclose a copy of your latest annual Form 16/Income tax return, i.e, FY 2023-24 and three recent monthly salary statements.)

11. a) Applicant's source of fund to meet the expenses to pursue the programme at IIMI

	Sources of Financing	Amount in Rs.
1	Own savings in the form of fixed deposits, cash, etc.	
2	Contribution from spouse	
3	Contribution from parents	
4	Contribution from other members of family, friends and relatives	
5	Scholarships, if any,	
6	Bank Loan: i) Bank loan Sanctioned amount ii) Bank loan Interest : _____ % per annum	
7	Other sources, like gifts, personal loans, if any (please specify)	
Total		

b) Is your family owning a car? YES / NO

c) If you are a member of the Hindu Undivided Family, then:

Total value of the assets on your name (as on 31 March 2024): Rs. _____

IT PAN No. for this HUF tax status: _____

12. a) Please state the income from agricultural land, residential and commercial properties, vehicles, etc. and the expected annual income on the same for F.Y.2023-2024. (Please attach separate sheet of this table in case of more than one property in the following heads)

Particulars	Current Market Value/ Amount (Rs.)	Income in the Financial Year 2023-24 in Rs.	Expected Income FY 2024-25 in Rs.
Agricultural properties			
Residential properties			
Commercial properties			
Any other			

b) Movable property- Please state and list the value of all financial assets you hold, including the balances in savings bank accounts, fixed deposits, investment in equity shares/debentures/bonds/mutual fund units/ NSC/ KVP/ PPF/ ULIP/ ELSS etc. and the expected annual income on the same for F.Y. 2024-25.

	Name of Asset/Investment	Current amt/ Market Value (as on 31 March 2024)	Expected Income FY 2024-25
a.	Balances in Savings/ Current bank account. Please also provide the name of the name of the bank account numbers of all family members 1. 2. 3. 4.		
b.	Cash in hand		
c.	Amount invested in fixed deposits		
d.	Investment in equity shares/debentures/bonds/mutual funds		
e.	Investment in NSC/KVP/ ULIP/ELSS etc. Date of Investment Amount Present value of the Investment		
f.	Other investments, if any		
Total		Rs.	Rs.

13. Details of life insurance policies carried on your own and by your family members:

Name of the Insured	Year in which policy taken	Face Value of the policy Rs.	Annual Premium in Rs./ Mode of Payment of premium
a) Self			
b) Spouse			
c) Parents			

14. Provide the following information about all members of your family (please go through the definition of the family for this purpose. Appropriate document shall be furnished in support of the gross annual income disclosed)

Name	Age	Relationship with the applicant	Occupation	Name of organization/ business	Bank Account Number and name of the bank. (All bank accounts)
1					
2					
3					
4					
			Total		

Note: Include the details of the participant himself/herself in the above along with family member details. If any family member is excluded in above details, please submit detailed justification. If any family member or any bank account is not included in the above table, please state the reasons in the separate sheet. Parent/Guardian to submit Income declaration as per format given.

AFFIDAVIT BY APPLICANT

I declare that the above application truly represents my financial position and includes all my resources. Should there be any significant change in my resources, I shall notify the Institute's NBFA Committee immediately.

If I get any other scholarship/financial assistance to finance the programme, I undertake to refund the NBFA to the Institute immediately.

Detection (or reported by any source) of false information provided by me, at any stage of the programme, will lead to termination from the program or withdrawal of degree in case the programme is completed OR any other action as decided by the competent authority of the Institute including termination of the financial assistance and refunding the entire amount drawn up to that point of time with interest.

Place: _____

Date: _____

Signature of the Applicant _____

Part II - Income Declaration by the Parent/Guardian

Income declaration for the year ended 31 March 2024 for the purpose of Need Based Financial Assistance for the financial year 2023-24 sought from Indian Institute of Management Indore.

Whereas, my son/daughter/ward, Mr./Ms. _____ a participant of the PGP/IPM/PGP HRM of the institute has applied for Need Based Financial Assistance and submitted details of the income of the family,

I, Shri/Shrimati _____, a permanent resident of _____ declare that my family's (please refer the definition of the family in the in the instruction for filling the NBFA application form)

annual gross income from all sources in the preceding year ended on 31st March 2024 is Rs. _____ (Rupees _____

_____ only) as per the details furnished in the datasheet. I also affirm that particulars of property held by me /my family are as shown in the application form. I make myself personally responsible for the accuracy of the facts and figures furnished.

I, declare that my family does not own a car.

I, further declare that I have gone through the instruction for filling the application form for the NBFA and undertake that in the event of the particulars given in this declaration being found to be false, I shall refund to the Director, Indian Institute of Management Indore the amount of the financial assistance/fee waiver paid to the said applicant and the Director's decision on whether the declaration of particulars is false shall be final and binding on me.

Place: _____

Signature _____

Date: _____

Name in full _____

Please tick the documents you have enclosed and indicate the no. of pages of the documents against each point.

- | | | |
|--|----------|------------------------|
| 1. Application Form Part-I duly signed | Yes / No | ___pages |
| 2. Income Declaration by the Parent/Guardian, Part-II | Yes / No | ___ pages |
| 3. Datasheet, Part-III (soft copy by email to pgpoffice@iimidr.ac.in) | Yes/No. | |
| 4. Read instruction for filing the application & FAQ | Yes / No | |
| 5. Copy of Form 16 for FY 2023-24 (if applicable) | Yes / No | ___ pages |
| 6. Copy of Income Tax Return for FY 2023-24 | Yes / No | ___ pages |
| 7. Salary certificate from the employer (if employed) | Yes / No | ___ pages |
| 8. Pension Certificate (if retired) | Yes / No | ___Pages |
| 9. Audited Financial Statements (if self-employed) | Yes / No | ___Pages |
| 10. Self-certified copies of the bank statements for past two- years of all bank accounts of participant and all family members. | Yes / No | ___ pages |
| 11. Explanation for any transaction exceeding Rs.10,000 in the bank Statement | Yes / No | ___ pages |
| 12. Certified copies of the FDRs, PPF, DEMAT account statement, NSC, RD, and any other investments as on 31-03-2024 | Yes / No | ___ pages |
| 13. Copy of EWS (Economy Weaker Section) Certificate, if applicable | Yes / No | ___ pages |
| 14. Copy of Aadhaar Card of the Applicant | Yes / No | ___ pages |
| 15. Any other documents | Yes / No | ___ pages |
| 1. _____ | | |
| 2. _____ | | |
| 3. _____ | | |
| | Total | ___ pages of documents |

Date: _____ Signature of the Applicant _____

Place: _____ Name of the Applicant _____