



Knowledge Consortium of Gujarat
Education Department
Application Form
SWAYAM Certificate Scholarship Courses
Proposal Form for Certified Course

Colour
Photograph

Signature of Student

❖ **Personal Profile**

1.	Name of Student	
2.	Stream (Branch)	
3.	Semester	
4.	Gender	
5.	E-Mail ID of Student	
6.	Contact Details of Student	
7.	Name of College	L. D. College of Engineering, Ahmedabad - 380015
8.	Type of College (Technical/Higher)	Technical Institute
9.	Area (Urban/Rural)	Urban

❖ **Certified Course**

1	Name of Course	
2	Course Mode	
3	Course Coordinator	
4	Course Total Duration	
5	Course Per Day Duration	
6	Course Examination Fees	
7	Course Category	
8	Course Start Date	
9	Course End Date	

❖ **Attachment:**

- **Catalog of course.**

☐ I hereby declare that the above particulars of facts and information stated are correct to the best of my belief and knowledge.

☐ I hereby declare that the above-requested course didn't take any kind of assistance/scholarship.

Student Sign: _____

Forwarded through,

Department Coordinator (Sign)

☐ Recommended and verified by the Principal.

Date:

Seal of College

Principal Sign