



BIHAR STUDENT CREDIT CARD SCHEME

VERIFICATION REPORT

Date of Report:

APPROVED

☐

REJECTED

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1	Registration ID	7096356
2	Received for Verification on (Date)	
3	Name of the Applicant	ANSHU KUMARI
4	Father's Name	ANIL KUMAR YADAV
5	Name of the Institute In full	OM SRI SAI COLLEGE OF PARAMEDICAL AND SCIENCES
6	Course Applied for	Bachelor of Physiotherapy
7	Name of the Competent Authority recognizing the Course *	
8	Roll No.(If available)/Admission Offer No.	
9	Name of the University in full	Bihar University of Health Sciences
10	University/Institute Recognized by (Name of Regulating Agency) *	
11	Institute Affiliated since (Date) *	
12	Validity of Affiliation up to (Date) *	
13	Certificate no. Of Affiliation Provided by the Institute *	
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	
15	Name/Designation/Contact Details of Contact Person of the Institute *	
16	State and District of the Institute	Bihar Madhubani
17	Category of City In which Institute is situated (A/B/C)	
18	Session (YYYY to YYYY)	2024 to 2028
19	Course Start Date Course End Date	October/2024 November/2028
20	Present Year/Semester of the Applicant *	
21	Fees Charged (Year wise/Semester wise) *	
22	Expected Payment Date of the Fees to the Institute *	
23	Whether the applicant resides/or intends to reside in the institute's Hostel*	

24 Candidate Admitted in the Institute via Management Quota ☐ Entrance Exam ☐ or other medium ☐

25	Bank Account Details of the Institute for receiving Fees			
Type of Fees	Name of Bank Account Holder *	Account No. *	IFSC Code*	Bank Name & Branch *
Tuition fees				
Hostel fees				
Mess fees				
Any other				

26 Whether Fees required by the Institute through DD, Furnish details

Note :The above serial no – 25 is mandatory, in case the institute requires different type of fees namely Tuition Fees, Hostel Fees, Mess Fees,etc. in more than one account.If the institute requires all types of fees namely Tuition Fees, Hostel Fees, Mess Fees etc. in only oneaccount, then only single account details of the institute is to be furnished.

Signature of the Authorized Contact Person of the Institute.

CERTIFICATE OF TPVA

I have verified the above mentioned particulars with respect to the applicant and on the basis of this verification report the applicant's case for sanction of Education Loan by BSEFCL under Bihar Student Credit Card Scheme is RECOMMENDED/NOT RECOMMENDED (Reasons therefor)

Remarks,if any -

Signature of the verifying TPVA Representative