



# BIHAR STUDENT CREDIT CARD SCHEME

## VERIFICATION REPORT

Date of Report: 30/12/2024

APPROVED ☒

REJECTED ☐

1	Registration ID	7127641		
2	Received for Verification on (Date)	30/12/2024		
3	Name of the Applicant	SAURABH KUMAR		
4	Father's Name	SANJAY KUMAR SINGH		
5	Name of the Institute In full	AMBEDKAR INSTITUTE OF HIGHER EDUCATION,		
6	Course Applied for	DANAPUR- PATNA Bachelor of Physiotherapy		
7	Name of the Competent Authority recognizing the Course *	Deptt. of Health, Govt. of Bihar		
8	Roll No.(If available)/Admission Offer No.	AMBP/BPT-79/2024		
9	Name of the University in full	Aryabhata Knowledge University, Patna, Bihar Nurses		
10	University/Institute Recognized by (Name of Regulating Agency) *	Registration Council Patna, Bihar University of Health Sciences,		
11	Institute Affiliated since (Date) *	Patna/ Patliputra University, Patna, All India Council for Technical Education Deptt. of Health, Govt. of Bihar 2019		
12	Validity of Affiliation up to (Date) *	2024-2028		
13	Certificate no. Of Affiliation Provided by the Institute *	37-H-Fig-6144/2024/1615(02.12.2024)		
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	9386806867/Prof. Dr. C. J. Singh Vikram Kumar Office Superintendent		
15	Name/Designation/Contact Details of Contact Person of the Institute *	Bihar Patna		
16	State and District of the Institute			
17	Category of City In which Institute is situated (A/B/C)	B		
18	Session (YYYY to YYYY)	2024 to 2028		
19	Course Start Date	December/2024		
20	Course End Date	December/2028		
21	Present Year/Semester of the Applicant *	1st year		
22	Fees Charged (Year wise/Semester wise) *	year wise		
23	Expected Payment Date of the Fees to the Institute *	Before 31st Nov & every year		
24	Whether the applicant resides/or intends to reside in the institute's Hostel*	NO		
25	Candidate Admitted in the Institute via	Management Quota <input type="checkbox"/> Entrance Exam <input checked="" type="checkbox"/> or other medium <input type="checkbox"/>		
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	Ambedkar Institute of Higher Education	4717020000022	BARBODHOLAKI	Bank of Baroda, Grah
Hostel fees				Road Patna - 801503
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 one account, 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