



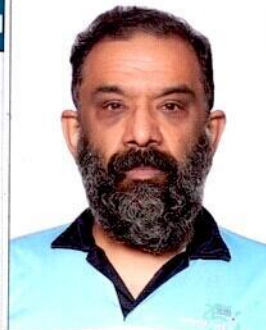
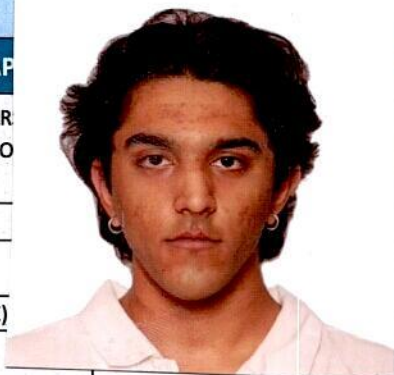
EDUCATION LOAN (03/17)

AP

(PLEASE COMPLETE ALL PARTICULARS
BLOCK LETTERS AND TICK (✓) OPTION
WHEREVER APPLICABLE)

CIF NO. (FOR OFFICE USE)

ACCOUNT NO. (FOR OFFICE USE)



(I) PERSONAL INFORMATION OF THE APPLICANTS [TICK (✓) OPTIONS WHEREVER APPLICABLE]

PARTICULARS	STUDENT	FATHER / HUSBAND	CO-BORROWER / GUARANTOR
1. FIRST NAME	Shrutant	Perumangode	Soumya
2. MIDDLE NAME	Ramaswamy.	Neelakandhan	Ramaswamy.
3. LAST NAME		Ramaswamy.	
4. FATHER'S / HUSBAND'S FIRST NAME	Perumangode		
5. FATHER'S / HUSBAND'S MIDDLE NAME	Neelakandhan		
6. FATHER'S / HUSBAND'S LAST NAME	Ramaswamy		
7. RELATIONSHIP WITH THE STUDENT	SELF	FATHER	MOTHER
8. DATE OF BIRTH (DD/MM/YYYY)			
9. RELIGION	<input checked="" type="checkbox"/> HINDU / <input type="checkbox"/> MUSLIM / <input type="checkbox"/> CHRISTIAN / <input type="checkbox"/> SIKH / <input type="checkbox"/> PARSI / <input type="checkbox"/> BUDDHIST / <input type="checkbox"/> JAIN / <input type="checkbox"/> OTHERS	<input checked="" type="checkbox"/> HINDU / <input type="checkbox"/> MUSLIM / <input type="checkbox"/> CHRISTIAN / <input type="checkbox"/> SIKH / <input type="checkbox"/> PARSI / <input type="checkbox"/> BUDDHIST / <input type="checkbox"/> JAIN / <input type="checkbox"/> OTHERS	<input checked="" type="checkbox"/> HINDU / <input type="checkbox"/> MUSLIM / <input type="checkbox"/> CHRISTIAN / <input type="checkbox"/> SIKH / <input type="checkbox"/> PARSI / <input type="checkbox"/> BUDDHIST / <input type="checkbox"/> JAIN / <input type="checkbox"/> OTHERS
10. CASTE CATEGORY	<input type="checkbox"/> SC / <input type="checkbox"/> ST / <input type="checkbox"/> OBC / <input checked="" type="checkbox"/> GENERAL / <input type="checkbox"/> OTHERS	<input type="checkbox"/> SC / <input type="checkbox"/> ST / <input type="checkbox"/> OBC / <input type="checkbox"/> GENERAL / <input type="checkbox"/> OTHERS	<input type="checkbox"/> SC / <input type="checkbox"/> ST / <input type="checkbox"/> OBC / <input type="checkbox"/> GENERAL / <input type="checkbox"/> OTHERS
11. GENDER	<input checked="" type="checkbox"/> MALE / <input type="checkbox"/> FEMALE / <input type="checkbox"/> THIRD GENDER	<input checked="" type="checkbox"/> MALE / <input type="checkbox"/> FEMALE / <input type="checkbox"/> THIRD GENDER	<input type="checkbox"/> MALE / <input checked="" type="checkbox"/> FEMALE / <input type="checkbox"/> THIRD GENDER
12. MARITAL STATUS	<input checked="" type="checkbox"/> SINGLE / <input type="checkbox"/> MARRIED	MARRIED	SINGLE / <input checked="" type="checkbox"/> MARRIED
13. HIGHEST EDUCATIONAL QUALIFICATION			
14. MARKS OBTAINED IN HIGHEST QUALIFICATION %			
15. OCCUPATION	STUDENT	SERVICE	HOUSE WIFE
16. INCOME FROM ALL SOURCES (Rs.)		2.1L	
17. PAN NO.*			
18. AADHAAR NO.*	497671888348	507460956379	454829399186.
19. PASSPORT NO. (COMPULSORY FOR STUDIES ABROAD)			
20. OTHER IDENTIFICATION PROOF, IF ANY (DRIVING LICENSE / VOTER ID NO.)			
21. PRESENT ADDRESS (HOUSE NO., ROAD NAME, LOCALITY, CITY, PIN CODE, DISTRICT, STATE)	D-301, Rustonjee Elite CTS 195 (Pt-D S No 06) Near D.N Nagar Police Station andheri west. Mumbai - 400053		

22. OFFICE ADDRESS (HOUSE NO., ROAD NAME, LOCALITY, CITY, PIN CODE, DISTRICT, STATE)	DORFKETAL CHEMICALS PVT LTD. Tower 2, Ramchandra Lane Kanchpada Malad (W)-MUMBA-64		
23. PERMANENT ADDRESS (HOUSE NO., ROAD NAME, LOCALITY, CITY, PIN CODE, DISTRICT, STATE)			
24. CONTACT NO.	7718808938	9867015009	9820530713
25. E-MAIL ID	shekhartr@gmail.com	rammasuany@dorketal.com	soumyarajesh07@gmail.com
26. ADDRESS FOR CORRESPONDENCE [TICK (V) OPTIONS AS APPLICABLE]	RESIDENTIAL ADDRESS / OFFICE ADDRESS / PERMANENT ADDRESS		

(II) PRESENT BANKER DETAILS

PARTICULARS	STUDENT	PARENT / HUSBAND	CO-BORROWER / GUARANTOR
1. NAME OF THE BANK			
2. BANK BRANCH			
3. SB / OD ACCOUNT NO.			
4. DIRECT / INDIRECT LIABILITY DETAILS			
5. WHETHER RELATED TO CHAIRMAN / DIRECTORS / EMPLOYEE OF OUR BANK OR ANY OTHER BANKS. IF YES, DETAILS OF RELATIONSHIP			

(III) DETAILS OF THE COURSE / STUDY [TICK (V) OPTIONS WHEREVER APPLICABLE]

1. WHETHER UNDER MERIT / MANAGEMENT QUOTA	MERIT / MANAGEMENT QUOTA
2. NAME OF THE COURSE	DRAMA and Dramatics / Theatre Arts
3. COURSE CATEGORY	DIPLOMA / GRADUATION / POST-GRADUATION DEGREE / POST-GRADUATION DIPLOMA / PROFESSIONAL COURSE
4. NAME OF THE INSTITUTION & UNIVERSITY	Boston University
5. WHETHER THE COURSE IS FOR STUDIES ABROAD	YES / NO
6. ADDRESS OF THE INSTITUTION (CITY, PIN, DISTRICT, STATE, COUNTRY)	203, Bay State Road, Boston, MA. 02215
7. RANKING OF THE INSTITUTION OR COURSE	3
8. DURATION OF COURSE	4 yrs.
9. DATE OF COMMENCEMENT OF COURSE	05 Sep 2023
10. DATE OF COMPLETION OF COURSE	25 Aug 2027

(IV) COST OF COURSE / SOURCE OF FINANCE: (ALL AMOUNTS IN Rs.)

PARTICULARS	YEAR 1	YEAR 2	YEAR 3	YEAR 4	YEAR 5	TOTAL
1. TUITION FEES	65168 \$	65168 \$	65168 \$	65168 \$		
2. EXAMINATION FEES						
3. BOOKS/STATIONERY						
4. EQUIPMENT / COMPUTER						
5. HOSTEL EXPENSES						
6. SUNDRIES / TRAVEL						
7. TOTAL						
8. OWN SOURCE / SCHOLARSHIP						
9. INSURANCE PREMIA FOR THE DURATION OF LOAN AND START UP PERIOD						
10. LOAN REQUIRED						1.5 cr-

(V) DETAILS OF SECURITY OFFERED (FOR LOANS ABOVE Rs. 7.5 LACS)**A) IMMOVABLE PROPERTY**

PLOT / FLAT / HOUSE NO.	TITLE DEED		IN THE NAME OF	ADDRESS	ESTIMATED MARKET VALUE
	LEASE / FREEHOLD	DATED			
3019 & 302			P. N. RAMASWAMY & MRS. SOUMYA	Building No. 1, CTS. No. 195 of Village Andheri, D. N. Nagar, Andheri (W) Mumbai 400053.	14 Cr.

B) VEHICLE / CAR (PLEASE GIVE DETAILS INCLUDING REGISTRATION NUMBER, ETC)**C) OTHER SECURITIES**

TYPE OF THE SECURITY	SERIAL NO.	NAME OF THE HOLDER	MATURITY VALUE	ESTIMATED MARKET VALUE

(VI) PROPOSED / PREFERRED REPAYMENT AND PAYMENT OF INTEREST [TICK (v) OPTIONS WHEREVER APPLICABLE]

REPAYMENT PROPOSED	NUMBER OF INSTALLMENTS: 180	AMOUNT (Rs.) PER MONTH:
REPAYMENT TO BE DONE BY	BY STUDENT <input checked="" type="checkbox"/> / BY GUARDIAN	
PAYMENT OF FULL INTEREST AS AND WHEN APPLIED DURING THE MORATORIUM	YES / NO <input checked="" type="checkbox"/>	

(VII) GENERAL [TICK (v) OPTIONS AS APPLICABLE]

1. DO YOU HAVE AN EXISTING RELATIONSHIP WITH SBI? IF SO, DETAILS THEREOF	
2. DO YOU WISH TO OPEN A SAVINGS BANK WITH SBI?	YES / NO
3. IS ANY GUARANTEE GIVEN TO SBI / OTHER BANK?	YES / NO IF YES, DETAILS THEREOF

(VIII) DOCUMENTS REQUIRED [TICK (v) OPTIONS WHEREVER APPLICABLE]

• Mark sheet of last qualifying examination for school and graduate studies in India	YES / NO
• Copies of letter conferring scholarship, free-ship, etc.	YES / NO
• Documents evidencing duration of course of commencement thereof, viz. Prospectus or Certificate from the Competent Authority of the Institution	YES / NO
• Proof of admission to the course	YES / NO
• Schedule of expenses for the course, from the institution	YES / NO
• Passport size photographs of the Student / Parent / Co-obligant / Guarantor (2 copies each)	YES / NO
• Proof of Income / assets (If any)	YES / NO
• Latest Salary certificate & form No. 16 (For Salaried Persons)	YES / NO
• ITAO / IT Returns for the last 2 years (if I.T. Assessee) duly accepted by the ITO	YES / NO
• Statement of bank account for the last six months of the Parent / Guardian	YES / NO
• Original sale deed and other document of title to property in respect of immovable property offered as collateral security	YES / NO
• Proof of residence (Identity Card / Passport / Voter Identification Card / Driving licence)	YES / NO
• *Undertaking letter in the absence of PAN & Aadhaar Nos.	YES / NO

(IX) DECLARATION

I / We hereby apply for a loan from State Bank of India to the extent indicated in the Section (4) of this application form. I / We declare that the foregoing particulars and information furnished in this application form are true, accurate and complete and that they shall form the basis of any loan State Bank of India may decide to sanction to me / us. I / We confirm that I / we have / had no insolvency proceedings against me / us. Nor have, I / we been adjudicated insolvent. I / We further confirm that I / we have read the terms and conditions and understood the contents therein. I / We am / are aware that if I / we opt for loan at floating rates of interest, the Equated Monthly Instalment will comprise Principal and Interest based on State Bank Advance Rate which is subject to change from time to time.

I / We agree that State Bank of India may at its discretion conduct discreet inquiries in respect of this application. I / We undertake to inform as to any change in my / our occupation / employment, residential / official address and to provide any further information that the Bank may require. State Bank of India will be at liberty to take such action as it may deem necessary if my / our above statements are found to be untrue. I / We agree that State Bank of India shall have the sole discretion to reject / reduce loan amount / our loan application without assigning any reason thereof. I / We further agree that my / our loan transactions shall be governed by the rules of State Bank of India which may be in force from time to time. I also hereby give my consent to send the application to RACPC for sanction if in order and disbursement on sanction from RACPC or any Branch as per process prescribed by State Bank of India. I may carry out future transactions at the above mentioned Branch as Home Branch.



Signature of the Student

Signature of the Parent / Husband



Signature of the Co-borrower / Guarantor

Place:

Date:

(X) REFERENCES

(NAMES & ADDRESSES OF TWO REFEREES WHO ARE NOT RELATED TO YOU AND MAINTAINING SATISFACTORILY CONDUCTED BANKING RELATIONSHIP FOR OVER ONE YEAR / RESPECTABLE IN SOCIETY)

State Bank of India may make enquiries from the referees if it deems necessary

REFERENCE 1		REFERENCE 2	
NAME		NAME	
ADDRESS (HOUSE NO., ROAD NAME, LOCALITY, CITY, PIN, DISTRICT, STATE)		ADDRESS (HOUSE NO., ROAD NAME, LOCALITY, CITY, PIN, DISTRICT, STATE)	
CONTACT NO.		CONTACT NO.	

(XI) FOR OFFICE USE ONLY

At Branch / OSF -	Signature/s of the applicant/s obtained in our presence and verified and sent to RACPC on _____				Name & Signature (Branch / OSF)	
At RACPC (Data related to CIF Creation)	VIP Code (0 for No , 1 for Yes)		Customer Type - Personal		Relative Code (father / spouse)	
Greetings required			Occupancy (home owner, tenant, etc.)		Customer evaluation required	
CIS Organization code			Segment Code		CIBIL Reference made	
Date _____		SIGNATURE OF THE APPRAISING OFFICER				