

कार्यालय महालेखाकार लेखा व हक्र (राजस्थान, जयपुर)

स्नेहलता छात्रवृत्ति सूचना

Sneh Lata Narang Scholarship Scheme for professional Development
for the year 2024-25.

Last date to submit application in this office	23.10.2024
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नोट- छात्रवृत्ति से सम्बंधित विस्तृत जानकारी संलग्न है

व.लेखाधिकारी/प्रशासन-1

INSTITUTE OF PUBLIC AUDITORS OF INDIA



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Comptroller & Auditor General of India

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No. IPAI/106.12/2024-25/131
21.08.2024

To,

All the Pr.Accountant General/Accountant General (Audit/ A&E)

Sub.: Sneh Lata Narang Scholarship Scheme for Professional Development for the year 2024-25.

Sir/ Madam,

Institute of Public Auditors of India (IPAI) is administering Sneh Lata Narang Scholarship Scheme for Professional Development. The Scheme covers eligible wards of all group 'B', 'C' and 'D' officers/ staff in the whole time service of the IA&AD. The Scholarship is available for any post-graduate and above studies specializing in Accounts, Finance, Human Resources Management and related areas. Scope and other terms and conditions including eligibility criteria for grant of scholarship under the scheme, Application Form and format for Admission Certificate are contained in the Annexure to this letter.

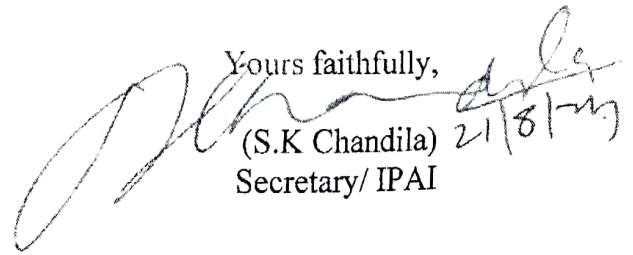
2. With a view to have a good response, you are requested kindly to give wide publicity to the scheme in your office including your branch offices.

3. We intend to award 2 scholarships this year of Rs 16,000/- each. We request if the name(s) of suitable candidates along with duly filled application forms are sent to us by 31.10.2024 positively.

Encl: As Above

Yours faithfully,

(S.K Chandila)
Secretary/ IPAI


21/8/24

ANNEXURE - I

"SNEH LATA NARANG SCHOLARSHIP FOR PROFESSIONAL DEVELOPMENT SCHEME"

DEFINITION

Unless otherwise provided, the following definition shall apply for purpose of this scheme:

1. Employee – All Group B, C and D officers/ staff in the whole time service of the Indian Audit and Accounts Department.
2. Ward – Means dependant and legitimate child of an employee and includes step child and a legally adopted child.

SCOPE

Covers the wards of all Group B, C and D officers/ staff of the Indian Audit and Accounts Department irrespective of emoluments drawn by them.

TERMS AND CONDITIONS

1. An employee must have completed one year of continuous service on or before 1st April of the year in which the Scholarship is applied for.
2. Scholarship shall not be awarded to more than one eligible ward of any employee. In case both the parents are employed in the Department, only one ward of such parents is eligible.
3. The scholarship shall be awarded on yearly basis to be disbursed in two instalments.
4. Wards studying in regular classes will be eligible for the scholarship. Wards studying privately or through correspondence courses will not be eligible.
5. The scholarship shall be available only for studies in Institutions recognised/ approved/ aided by Central/ State Governments.
6. Only those wards securing not less than 70% in Engineering Subjects like B.Tech/ B.E. and not less than 75% marks in other subjects of Science Stream and 60% marks in Arts and Commerce Stream in the aggregate will be eligible for consideration for the scheme.
7. If an employee retires/ dies on a date subsequent to the sanction of the Scholarship during the academic year, the scholarship amount shall continue to be paid subject to other conditions.
8. The Scholarship shall be deemed to be terminated on the removal, dismissal and compulsory retirement of the concerned employee.
9. The Scholarship shall be deemed to be terminated if the ward is detained in the same class, discontinues studies, is rusticated/ suspended from the Institution/ University.

AMOUNT OF SCHOLARSHIP

For the year 2024-25, the amount of scholarship is about Rs.16,000/- per recipient subject to a maximum of two scholarships. The scholarship will be disbursed in advance in two instalments in the form of a multicurrency cheque in favour of parent/guardian.

COURSES FOR WHICH SCHOLARSHIP SHALL BE AVAILABLE

The Scholarship shall be available for any Post-Graduate (and beyond) studies specializing in Accounts, Finance, Human Resources, Management and related areas.

**SCHOLARSHIP SCHEME
(FRESH/ RENEWAL) APPLICATION FORM**

1. Particulars of the Employee:

- (i) Name in full (in block letters)
- (ii) Designation
- (iii) Section
- (iv) Date of appointment
- (v) Date of retirement
- (vi) Yearly emoluments
- (vii) Income from other sources (Including spouse)

2. Particulars of the ward for whom the Scholarship is requested for:

- (i) Name of the ward (in block letters)
- (ii) Age
- (iii) Relationship with the employee
- (iv) Detail of Institution in which admission obtained
- (v) Marks in last annual examination: Maximum Obtained Percentage
10+2 or Pre-University for fresh applicant (aggregate). Attested copies of mark sheet to be attached.
- (vi) Marks obtained in Graduation. Attested copies of mark sheet to be attached.
- (vii) Marks obtained in last semester with percentage for renewal. Attested copies of mark-sheet to be attached.
- (viii) Freeship/ scholarship from other sources, if any
 - (a) Particulars
 - (b) Amount

3. Any other information the employee may like to mention:

I have carefully gone through the rules and am aware of the liability to refund the amounts paid in case of violations of any of the clauses in the rules.

Date: _____

(Signature)

Station: _____

(Name)

ADMISSION CERTIFICATE

Certified that Mr/ Ms _____

son/ daughter of Mr/ Mrs _____

is a regular student admitted studying in _____
of this College/ Institution. The conduct of the student is satisfactory. He/ she is getting
Rs. _____ as scholarship/ freeship from or through this Institution.

2. This College/ Institution is recognized/ approved/ aided by the Central/ State
Government/ Union Territories.

3. The student has to compulsorily stay/ need not stay in the hostel attached to the
Institution.

Signature of Principal

Seal

Name and address of College/ Institution

Date:

Note: Strike off whatever not applicable

(FOR OFFICE USE ONLY)

The application has been scrutinized and observed that:

- | | | | |
|------|------------------------------|-----|----|
| (i) | The employee is eligible | Yes | No |
| (ii) | The ward is eligible | Yes | No |
| | In case of 'NO' give reasons | | |

SIGNATURE
HEAD OF DEPARTMENT

Date: _____

(Name and Designation)