

**S.T.      Scholarship      Notice**  
**URGENT      (BIOLOGY GROUP)**

S.No.	Subject /Groups
1.	<b>Chemistry, Forensic Science, Zoology</b>
2.	<b>Chemistry, Anthropology, Zoology</b>
3.	<b>Chemistry, Geology, Botany</b>

उपर्युक्त विषय समूहों के अनुसूचित जनजाति के प्रत्येक विद्यार्थी को सूचित किया जाता कि छात्रवृत्ति प्राप्ति हेतु संलग्न प्रोफार्मा APPLICATION FOR LINKING/SEEDING AADHAR NUMBER AND RECEIVING DBT BENEFITS INTO BANK ACCOUNT- (NPCI MAPPING) भरना अनिवार्य है।

विद्यार्थी फार्म भरकर इस मेल आई डी पर मेल करें।

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प्रतिलिपी:- प्रभारी,बेबसाइट सेल,बेबसाइट पर अपलोड करने हेतु  
संलग्न - प्रोफार्मा

*A.Pandey*  
21/8/21  
(प्रो. अर्चना पांडे)  
अधिष्ठाता, रसायन वि. एवं प्रौद्योग. अ. शाला  
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APPLICATION FOR LINKING/ SEEDING AADHAAR NUMBER  
AND RECEIVING DBT BENEFITS INTO BANK ACCOUNT-(NPCI MAPPING)\*

The Branch Manager,  
.....Branch  
.....Bank

Date:

Dear Sir,

Account No. \_\_\_\_\_ in A/c Name \_\_\_\_\_

Linking / Seeding of Aadhaar in NPCI-Mapping for Receiving Direct Benefits

I am maintaining a Bank account No. \_\_\_\_\_ with your Branch.

2. I submit my Aadhaar number and voluntarily give my consent to:
- Use my Aadhaar Details to authenticate me from UIDAI.
  - Use my Mobile Number mentioned below for sending SMS Alerts to me.
  - Link the Aadhaar Number to all my existing/new/future accounts and customer profile (CIF) with your Bank.

(Signature/Thumb Impression of customer)

OPTION FOR RECEIVING DBT BENEFITS ( TICK ONE)

- I wish to seed my account No. \_\_\_\_\_ with NPCI mapper to enable me to receive Direct Benefit Transfer (DBT) including LPG Subsidy from Govt. of India (GOI) in my above account. I understand that if more than one Benefit transfer is due to me, I will receive all the benefit transfers in the same account. **(for customer who have not so far seeded account with NPCI Mapper)**
- I already have an account with \_\_\_\_\_ (name of Bank) having IIN Number\*\*, and seeded with NPCI Mapper for receiving DBT from GOI. **I request you to change my NPCI mapping(DBT Benefit Account) to my account with your Bank.**
- I already have an account with another bank \_\_\_\_\_ (name of Bank) having IIN Number\*\*, and seeded with NPCI Mapper for receiving DBT from GOI. **I do not want to change my NPCI mapping(DBT Benefit Account) from the existing Bank.**
- I do not wish to seed my accounts from your Bank with NPCI Mapper **(I will not be getting DBT).**

3. I have been explained about the nature of information that may be shared upon authentication. I have been given to understand that my information submitted to the bank herewith shall not be used for any purpose other than mentioned above, or as per requirements of law.

4. I hereby declare that all the above information voluntarily furnished by me is true, correct and complete.

Yours faithfully

(Signature/Thumb Impression of customer)

[if consent sent through BC/BDO/VO]

- I hereby authorise the Banking Correspondent
  - I hereby authorise the Sarpanch, / V.O./B.D.O./
- to submit the above consent letter to the bank.

Name :

Mobile No.:

Email:

Encl: Copy of Aadhaar

(Signature/Thumb Impression of Customer)

\*NPCI Mapping : Mapping is a process of associating a Bank with Aadhaar number which is facilitated by NPCI for Direct Benefit Transfer to the respective Bank who have linked the Aadhaar Number to a specific Bank account