



LIVE 4 HELP FOUNDATION

Better Living by Helping

Educational Support Form

Reg.No. 372326

To,
The Governing Body
Live 4 Help Foundation
Dwarka, New Delhi

I hereby request you to kindly help me out in meeting the expenses of my Child towards his/her Education for Class _____ in School _____. We are very poor and can't afford the expenses of education of my child. We have no objection with this organisation or its Member/ Volunteer /Staff if they are publishing the Photo and name of my child in any way for getting donations, sponsors, stipend or scholarship.

1 STUDENT/FAMILY DETAILS (*Mandatory Fields to be filled)

Name of student *	_____	Class *	_____
Gender*	_____	Date of Birth(dd/mm/yy)*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name of Parent/Guardian*	_____	Annual Income(Rs)*	_____
Address*	_____		
State*	_____	Postal Code*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Email ID	_____
Preferred language of communication *	_____		
ID / Address Proof (voter ID, adhaar etc.)*	_____		

PHOTO

2 INSTITUTION DETAILS (*Mandatory Fields to be filled)

Name of School*	_____		
Address*	_____		
State*	_____	Postal Code*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name of Headmaster/Class teacher*	_____	Mobile*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

3 SUPPORT DETAILS (*Mandatory Fields to be filled)

Admission fee(Rs)	_____	Annual Tuition fee(Rs)	_____
Book Purchase(Rs)	_____	Stationery Purchase(Rs)	_____
Total Amount (in words) Rs/-*	_____		
Total Amount (in figures)Rs/-*	_____		
Other support	<input type="checkbox"/> Coaching(online)	<input type="checkbox"/> Coaching(offline)	<input type="checkbox"/> Computer training <input type="checkbox"/> Counselling

Bank Details of Student (Attach photocopy of passbook)

Account no.* _____ IFSC CODE* _____

Declaration:

I declare that above information is correct to the best of my knowledge and I am unable to arrange funds for the purpose stated above.

DATE: _____

SIGNATURE: _____

LIVE 4 HELP FOUNDATION

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