



CIRCULAR

Sub: Submission of application with Documents as per the guidelines to award scholarship-reg

Ref: RGU/SWF/Scholarship /443/2019,Dated:05/09/2020

With ref to above subject and references all Principals are Instructed to strictly follow the university instructions submitting the enclosures in person with scanned copy of documents in a pendrive with laptop & Data card to the university to enter the details into the Scholarship portal to the university without fail before 26/09/2020.


REGISTRAR

Copy to:

The Dean/Director/Principals of all colleges affiliated to RGUHS. Karnataka.

To,

1. PA to VC/Registrar/Registrar(Eva),RGUHS, Bangalore
2. Office Copy.

RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/	No	Yes/No		
1.	GUBARGA INSTITUTE OF MEDICAL SCIENCES KALABURGI	1.AMRUTHA G	Y	-	Y	-	Income Certificate due ITR sent
		2.ARSHAD AHMED	Y	-	Y	-	-
		3.SUSHMA	-	N	Y	-	-
		4. DARSHAN S MARADI	-	N	Y	-	-
		5. ANITA KALL	-	N	Y	-	-
		6.SWARNIMA S PATIL	Y	-	Y	-	SSLC Marks in % Income Certificate due
		7.SHRIDEVI (07)	Y	-	Y	-	-
		8.ASHATA	-	N	Y	-	-
		7.SAGARA GURURAJ KURKARNI	Y	-	Y	-	-
		10.CHIRANJEEVI D M	Y	-	Y	-	Repeat SSLC Marks in %

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/	Sent No	Hard copy Sent Yes/No	Sent No	Remarks
1.	ESIC MEDICAL COLLEGE & POST GRADUATE INSTITUTE OF MEDICAL SCIENCES & RESEARCH BANGALORE	1.SARANYAV	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ No	Hard copy Sent Yes/No	Remarks	
1.	ESIC COLLEGE GULBARGA	1.NIKHIL MISHRA	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/	No	Yes/No		
1.	K V G MEDICAL COLLEGE & HOSPITAL SULLIA	I.BHAVVANA V	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ No	Hard copy Sent Yes/No	Remarks
1.	SHRIDEVI INSTITUTE OF MEDICAL SCIENCES & RESEARCH HOSPITAL TUMKUR	1. SWETA	-	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/ -	No N	Yes/ Y	No -	
1.	KRIMS ,KARWAR	1.SANDEEP N	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/No	Hard copy Sent Yes/No	Remarks	
1.	BANGALORE MEDICAL & RESEARCH INSTITUTE BANGALORE	1..NAGARAJ GOUDA H PATIL	-	N	Y	-
		2.AISHWARYA N	-	N	Y	-
		3.SUBHANHMED B LABBI	-	N	Y	-
		4.SAI SUMANTH G	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Medical

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/	No	Yes/No		
1.	BIDAR INSTITUTE OF MEDICAL SCIENCES BIDAR	1.AISWARYA	-	N	Y	-	-
		2.BASAVASHREE	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Dental

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ No	Hard Copy Sent Yes/NO	Remarks	
1.	S D M COLLEGE OF DENTAL SCIENCES & HOSPITAL DHARWAD	I.VINITA SHETTY	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Dental

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ No		Hard Copy Sent Yes/NO		Remarks
1.	SRI RAJIV GANDHI COLLEGE OF DENTAL SCIENCES & HOSPITAL BANGALORE	1.POORNIMA A NAYAK	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Dental

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/No	Hard Copy Sent Yes/NO	Remarks	
1.	V S DENTAL COLLEGE & HOSPITAL BANGALORE	8.SANDHYA N R HOLLA	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Pharmacy

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/	NO	Yes/NO		
1.	SRI JAGADGURU MALLIKARJUNA MURUGHARAJENDRA COLLEGE OF PHARMACY CHITRADURGA	1.BEERALINGA G	-	N	Y	-	-
		2.DHANUSH S	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Pharmacy

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard copy Sent		Remarks
			Yes/	NO	Yes/NO		
1.	S J M COLLEGE OF PHARMACY CHITRADURGA	1.BUSHRA RAHAMANN R	Y	-	Y	-	Domicile Certificate due Aadhar Sent
		2.MUBASHIRA KOUNIN M S (Pharm.D)	Y	-	Y	-	Domicile Certificate due Aadhar Sent

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Pharmacy

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Yes/ NO	Hard copy Sent Yes/ NO	Hard copy Sent Yes/ NO	Remarks
1.	P E S COLLEGE OF PHARMACY BANGALORE	1.PRUTHVIL M	-	N	Y	-
		2.CHANDRASHEKAR R	-	N	Y	-
		3.KARENANNAVVAR	-	N	Y	-

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RGUHHS SCHOLARSHIP APPLICATION FORM

Faculty: Pharmacy

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ NO	Hard copy Sent Yes/NO	Remarks	
1.	ADICHUNCHANAGIRI COLLEGE OF PHARMACY B G NAGAR	1.SINDHUSHREEN	-	N	Y	-
		2.SONAKSHI M	-	N	Y	-
		3.PUSHPA S	-	N	Y	-
		4.HEMA P	-	N	Y	-
		5.CHANDRAKALA	-	N	Y	-
		6.HEMANTH KUMARI	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Ayurveda

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/NO	Remarks	
1.	N K JABSHETTY AYURVEDIC MEDICAL COLLEGE & PG CENTRE BIDAR	I.SRIKANT	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL.NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/NO	Remarks		
1..	K L E S INSTITUTE OF NURSING SCIENCES HUBLI	1. VATSALYA G UPPAR	Y	-	Y	-	Repeat Domicile Certificate due Aadar Sent
		2. ASHWINI B BEERAGOND	Y	-	Y	-	Domicile Certificate due Rural Certificate due Aadar Sent
		3. SOYAL ABBASALI NADAF	Y	-	Y	-	-
		4. CHAITRA. Y HARIJAN	Y	-	Y	-	Repeat Income not matching
		5. RAHUL RATHOD	-	N	Y	-	-
		6. PRAVEEN KULKARNI	Y	-	Y	-	-
		7. SPOORTHI P K	-	N	Y	-	-
		8. RAKSHITA N PERUR	-	N	Y	-	-
		9. SHIVAMMA (P.B.SC)	Y	-	Y	-	-
		10. PRIYANKA (P.B.SC)	Y	-	Y	-	-
		11. DAYA DONGRU DHARWADKAR (P.B.SC)	Y	-	Y	-	-
		12. NEELAMMA KURUBAR (P.B.SC)	Y	-	Y	-	-
		13. JYOTIS PATIL (P.B.SC)	Y	-	Y	-	-

RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/NO	Remarks	
1.	IKON NURSING COLLEGE Bidadi	1. USHA C	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/No	Remarks	
1..	INDIRA NURSING COLLEGE BANGALORE	1. PRINCITA DSOUZA	-	N	Y	-
		2. ASHA CUTTINHA	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/No		Hard copy Sent Yes/No		Remarks
1.	SRI SIDDHARTHA COLLEGE OF NURSING TUMKUR	1. SAHANAK	-	N	Y	-	-
		2. POOJAMA	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/No	Remarks	
1..	UNITY ACADEMY OF EDUCATION COLLEGE OF NURSING MANGALORE	.1. HARSHITHA M B	-	N	Y	-
		2.LAVVANYA B	-	N	Y	-
		3.DEEPTHI M V	-	N	Y	-
		4.JASHMITHA S	-	N	Y	-
		5.MEGHANA S	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/No	Hard copy Sent Yes/No	Remarks
1.	Gouthami College of Nursing, Bangalore	1. SARATH KUMAR S.	-	Y	-
		2. VIGNESH G	-	Y	-
		3. YALLAMMA	-	Y	-
		4. SANTOSH AMARGOND	-	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/No	Remarks	
1.	Goutham College of Nursing, Bangalore	1. MAMANA BEGAM	-	N	Y	-
		2. P SUGANTHI	-	N	Y	-
		3. KUSUMA S	-	N	Y	-
		4. SHRIDHAR	-	N	Y	-
		5. SHUBHAM S MORE	-	N	Y	-
		6. JANANI K	-	N	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Nursing

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard copy Sent Yes/No	Remarks		
1.	KIDWAI CANCER INSTITUTE BANGALORE	1. TENSITA MARINA JOSEPH	Y	-	Y	-	Repeat
		2. SURAKSHA H C	Y	-	Y	-	-
		3. MANJULA F ANGADI (AHS)	Y	-	Y	-	Repeat 10 th markscard due
		4. PRATHIBHA K S	Y	-	Y	-	-
		5. DEEVENA P D	-	N	Y	-	-
		6. MAHANTESH	-	N	Y	-	-
		7. SADIQA NOORAHMED DEVALAPUR	-	N	Y	-	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Allied Health Sciences

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/NO	Hard Copy Sent Yes/NO	Remarks
1.	BANGALORE MEDICAL & RESEARCH INSTITUTE BANGALORE	1.PRAVEEN KUMAR	-	Y	-
		2.BHARATH PETER B	-	Y	-
		3.LAVANYA N K	-	Y	-
		4.RAGHU NAIK	-	Y	-

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Allied Health Sciences

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent		Hard Copy Sent		Remarks
			Yes/	NO	Yes/NO	NO	
1.	KIDWAI CANCER INSTITUTE BANGALORE	1. NOOR MOHAMAD P	-	N	Y	-	
		2. MOUNIKA Y C	Y	-	Y	-	
		3. UMESH L	Y	-	Y	-	
		4. NIKITHA B S	Y	-	Y	-	
		5. HEMASHREE V	-	N	Y	-	
		6. AVINASH SUBASH	-	-	Y	-	
		7. GANESH N BHANDARI	Y	-	Y	-	
		8. LAKSHMI NARAYANA S	-	N	Y	-	
		9. SAHANAR	-	N	Y	-	
		10. AMITH	-	N	Y	-	

RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: Allied Health Sciences

SL NO	COLLEGE NAME	CANDIDATE NAME	Hard Copy Sent		Soft copy Sent		Remarks
			Yes/NO		Yes/NO		
1.	NARAYANA HRUDAYALAYA INSTITUTE OF MEDICAL SCIENCES BANGALORE	1.BHAGAVANTARY	Y	-	-	N	
		2.MICHAEL SOMAN	Y	-	-	N	

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RGUHS SCHOLARSHIP APPLICATION FORM

Faculty: BPT

SL NO	COLLEGE NAME	CANDIDATE NAME	Soft copy Sent Yes/ NO	Hard Copy Sent Yes/NO	Remarks	
1.	SANJAY GANDHI INSTITUTE OF TRAUMA AND ORTHOPAEDICS	1. RUDRESH B	-	N	Y	-
		2. SRIKANTH S GOWDA	-	N	Y	-
		3. TALIYA MAQTASAR	Y	-	Y	-
		4. NANDINI A M	Y	-	Y	-
		5. FIRDOSE BANU	-	N	Y	-
		6. ANJALID	-	N	Y	-