

GOSSNER EVANGELICAL – LUTHERAN CHURCH IN CHOTANAGPUR AND ASSAM

GELC ARCHIVE

Call Number: **GELC-A _ 001 _ 1426**

Classification:

Original File No:

Title

SCHOLARSHIP APPLICATIONS_ MEDICAL STUDIES- PRABHUSAHAY LINDA (GELC) RAVINA ANJALI AIND (GELC) JAYANT ARUN AIND (GELC)

Volume:

Running from year: 1991

till year:

Content:

- Application
- Application
- Application

P. L. H. & RECONSTRUCTIVE SURGERY HOSPITAL, SALUR,

Hosp. No. _____

Name : _____ Age : _____ Sex : _____

Address: _____

SUMMARY OF ADMISSIONS

APPLICATION FOR SPONSORSHIP TO MBBS AND POST
AT LUDHIANA CHRISTIAN MEDICAL COLLEGE

1. Name: PRABHU SAHAY LINDA
(As per school Certificate)

2. Date of Birth: 28-12-67

3. Sex: Male

4. Educational Qualifications: B.Sc



5. Father/ Guardian's Name and Address: Mr. Jay Masih Linda
vill. Hulhundy
p.o. Hattia, Ranchi

6. Full Address for Correspondence: Prabhu Sahay Linda
vill. Hulhundy
p.o. Hattia, Ranchi - 83400

7. Marks obtained +2 or Matric or MBBS if for post graduate:
408

8. Application sent for Admission to: MBBS / P.G. M.B.B.S IIIrd year

9. If for P.G., which discipline:

10. Church/Institution sponsorship:
(only candidates from Lutheran
Churches under UELCI/and their
institutions will be considered
for sponsorship) Letter should be
enclosed from the head of the
Church/Institution.

Rev. Dr. Aswag
Chairman
G. E. L. Church
Dhurwa & Salimar
Ranchi (K. S. S.)
9-4-91

11. References:

Three references - One from your own parish priest
(Names and addresses of three referees should be
typed on stamped envelopes and sent along with this
application).

12. Sponsorship Obligation:

I Mr. Prabhu Sahay if selected
to the MBBS/P.G. Course at Ludhiana promise to serve the
sponsoring institution/UELCI institution for a period of
three years after completing my course. If for any reason
I am not able to fulfil my obligation I promise to pay
Rs. 25,000/- (Rupees twenty five thousand) to the National
Lutheran Health & Medical Board/UELCI) and also pay the
college as per their rules. After selection to the course
I will sign the obligation on a stamped bond paper.

Signature of Parent/Guardian.

Prabhu Sahay Linda
Signature of applicant.

Witness: 1.

2.

(Three self addressed stamped envelops also to be enclosed along with those for referees) No fee is to be collected by the Church/ Institution.

~~Church/~~ Institutional sponsorship:

We are pleased to sponsor Mr. Prabhu Sahay Linda

~~S/o./D/o:~~ Sri Jay Masih Linda for 19.B.B.S

Course at Christian Medical College, Ludhiana for the year 91-92

(1st year) He/ She is a regular member/Staff of our church/

Institution (Name) _____

dated _____.

Head of Institution

Signature: Bishop/President

Name and address

Name and Address:

The completely filled application is to be sent to:

DR. R.H. THAIGARAJ
Executive Director
National Lutheran Health and Medical Board
SALUR-532531
Vizianagaram-Dist
Andhra Pradesh.

Dear Sir,

I am Christian member. My father is very poor
I am studying MBBS Coarse in Darbhanga Medical College (Bihar)
At present I am in second year student of this college. I want
to get some help or to get admission at Ludhiana Christian Medical
College in the 3rd & 4th year for the year 91-92 & 93-94.

I, therefore, request you to consider my case sympatheti-
cally to get admission at Ludhiana Christian Medical College
for MBBS.

Thanking you,

Yours faithfully,

Prabhu Sahay Linda
(Prabhu Sahay Linda)

CHURCH MEMBERSHIP CERTIFICATE.

This is to certify that Mr. Prabhu Sahay Linda s/o Mr Jaymash Linda, at New Hulhundy, P.O. Hulhundy, Dt. Ranchi, Bihar is the member of our G. E. L. church Hulhundy, Parish Hatiya glaka Ranchi (K. S. S) under Gossner Evangelical Lutheran church Chhotanagpur and Assam.

He bears a good moral character, and I wish he succeeds in his life.

Chairman

Rev. C. A. B. Nag

G.E.L. church Dharwa-Salimar.

Rev. B. Nag

G.E.L. Church
Dharwa & Salimar
Ranchi (K. S. S.)

9.4.91

To,

Prabhu Sahay Linda

At - New Haldhunder

P.O - Haldhunder

Dist - Ranchi (Bihar)

Pin - 835 221

P. L. H. & RECONSTRUCTIVE SURGERY HOSPITAL, SALUR,

Hosp. No. _____

Name : _____ Age : _____ Sex : _____

Address 1 _____

SUMMARY OF ADMISSIONS

APPLICATION FOR SPONSORSHIP TO MBBS AND POST GRADUATE COURSE
AT LUDHIANA CHRISTIAN MEDICAL COLLEGE.

1. Name: JAYANT ARUN AIND
(As per school Certificate)

2. Date of Birth: 05-01-1973

3. Sex: MALE

4. Educational Qualifications: _____
APPLY FOR +2



5. Father/ Guardian's Name and Address:
MR. K. AIND, T.A&C.D SECTION MECON, RANCHI-2
P.O- HINOD, PIN- 834002

6. Full Address for Correspondence:
MR. K. AIND, T.A&C.D SECTION MECON, RANCHI-2
P.O- HINOD, PIN- 834002

7. Marks obtained +2 or Matric or MBBS if for post graduate:
Science - 70 (out of - 150)
English - 53 (out of - 150)

8. Application sent for Admission to: MBBS / P.G. MBBS

9. If for P.G., which discipline: ✓

10. Church/Institution sponsorship: GEL CHURCH RANCHI
(only candidates from Lutheran
Churches under UELCI/and their
institutions will be considered
for sponsorship) Letter should be
enclosed from the head of the
Church/Institution.

11. References:

Three references - One from your own parish priest
(Names and addresses of three referees should be
typed on stamped envelopes and sent along with this
application).

No references

12. Sponsorship Obligation:

I Jayant Arun Aind if selected
to the MBBS/P.G. Course at Ludhiana promise to serve the
sponsoring institution/UELCI institution for a period of
three years after completing my course. If for any reason
I am not able to fulfil my obligation I promise to pay
Rs. 25,000/- (Rupees twenty five thousand) to the National
Lutheran Health & Medical Board/UELCI) and also pay the
college as per their rules. After selection to the course
I will sign the obligation on a stamped bond paper.

Signature of Parent/Guardian.

Witness: 1. Kalyan Aind

2. Krushalhari Aind

Jayant Arun Aind
Signature of applicant.

(Three self addressed stamped envelops also to be enclosed along with those for referees) No fee is to be collected by the Church/ Institution.

Church/Institutional sponsorship:

We are pleased to sponsor Jayant Hem Aire
S/o./D/o: MR. Kalyan Aire for MBBS
Course at Christian Medical Collect, Ludhiana for the year 1991
_____. He/ She is a regular member/Staff of our church/
Institution (Name) Gossner Evangelical Lutheran
Church in Chotanagpur & Assam
dated 2.4.1991



Head of Institution

Signature: Bishop/President

Name and Address:

Name and address

Rev. C. S. R. ^{Adhyaksh} _(President)
G. E. L. Christian Chotanagpur Office
and Assam, Ranchi
Ranchi-834001.

The completely filled application is to be sent to:

DR. R. H. THAIKARAJ
Executive Director
National Lutheran Health and Medical Board
SALUR-532591
Vizianagaram-Dist
Andhra Pradesh.

OFFICE OF THE
GOSSNER EVANGELICAL LUTHERAN CHURCH IN CHOTANAGPUR & ASSAM

Ref : 264 /91/KSS - 25

Dated : 24.91..

To
The Head of the
Ludhiana C.M.C.H.

We are pleased to sponsor Jayant Arun. Aind.
D/6./S/o. Mr. Kalyan. Aind resident of
... Kadu Naya Basti, Near Algora station . . .
Kanekhi-2. P.O - Hinoor
for M.B.B.S. course at Christian Medical College Ludhiana
beginning from the year 1991. She/He is a bonafied member
of our G.E.L. Church in Chotanagpur and Assam.

We wish him/her all success in life.


(C.S.R. Topno)
Pramukh Adhyaksh

Pramukh Adhyaksh
(President,
G.E.L. Church in Chotanagpur
and Assam, Ranchi

cc: Dr. Thangaraj
Executive Director
N.L.H. & M.B.
SALUR.

P. L. H. & RECONSTRUCTIVE SURGERY HOSPITAL, SALUR,

Hosp. No. _____

Name : _____ Age : _____ Sex : _____

Address 1 _____

SUMMARY OF ADMISSIONS

APPLICATION FOR SPONSORSHIP TO MBBS AND POST GRADUATE COURSE
AT LUDHIANA CHRISTIAN MEDICAL COLLEGE



1. Name: RAVINA ANZLI AIND
(As per school Certificate)

2. Date of Birth: 16.7.1973

3. Sex: FEMALE

4. Educational Qualifications: _____
+2

5. Father/ Guardian's Name and Address: _____

MR. K. AIND, T.A & C.D. MECON, RANCHI-2
P.O - HINOD, PIN - 834002

6. Full Address for Correspondence: _____

MR. K. AIND, T.A & C.D. MECON, RANCHI-2
P.O - HINOD, PIN - 834002

7. Marks obtained +2 or Matric or MBBS if for post graduate:

ENGLISH - 49 PHYSICS - 66 BIOLOGY - 63
CHEMISTRY - 59 (OUT OF - 100)

8. Application sent for Admission to: MBBS / P.G. MBBS

9. If for P.G., which decipline: _____

10. Church/Institution sponsorship: GEL CHURCH RANCHI
(only candidates from Lutheran
Churches under UELCI/and their
institutions will be considered
for sponsorship) Letter should be
enclosed from the head of the
Church/Institution.

11. References:

Three references - One from your own parish priest
(Names and addresses of three referees should be
typed on stamped envelopes and sent along with this
application).

No references

12. Sponsorship Obligation:

I Ravina Anzli Aind if selected
to the MBBS/P.G. Course at Ludhiana promise to serve the
sponsoring institution/UELCI institution for a period of
three years after completing my course. If for any reason
I am not able to fulfil my obligation I promise to pay
Rs. 25,000/- (Rupees twenty five thousand) to the National
Lutheran Health & Medical Board/UELCI) and also pay the
college as per their rules. After selection to the course
I will sign the obligation on a stamped bond paper.

Mrs. Krushdharia Aind
Signature of Parent/Guardian.

Witness: 1. *Kalyan Aind*

2.

Ravina Anzli
Signature of applicant.

(Three self addressed stamped envelops also to be enclosed along with those for referees) No fee is to be collected by the Church/ Institution.

Church/Institutional sponsorship:

We are pleased to sponsor Ravina Anyli Aind
S/o./D/o: MR. Kalyan Aind for MBBS
Course at Christian Medical Collect, Ludhiana for the year 1991
_____. He/ She is a regular member/Staff of our church/
Institution (Name) Gossner Evangelical Lutheran
Church in Chotanagpur & Assam,
dated 2-4-91.

Head of Institution

Name and Address:


Signature: Bishop/President

Name and address

Rev. C. S. R. Aind, President
G. E. L. Church K. S. S. Office
Ranchi- 834 001

The completely filled application is to be sent to:

DR. R. H. THANGARAJ
Executive Director
National Lutheran Health and Medical Board
SALUR-532591
Vizianagaram-Dist
Andhra Pradesh.

OFFICE OF THE
GOSSNER EVANGELICAL LUTHERAN CHURCH IN CHOTANAGPUR & ASSAM

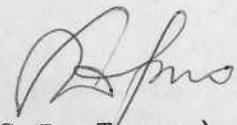
Ref : 264 /91/KSS - 25

Dated : 2.4.91 . . .

To
The Head of the
Ludhiana C.M.C.H.

We are pleased to sponsor Ravina Anjli Aind . . .
D/o/S/o . . MR. Kalyan Aind resident of
Kadru Naya Basti, Near Argora Station . . .
Ranchi-2 . . , P.O- Hinoo
for M.B.B.S. course at Christian Medical College Ludhiana
beginning from the year 1991. She/He is a bonafied member
of our G.E.L. Church in Chotanagpur and Assam.

We wish him/her all success in life.


(C.S.R. Topno)
Pramukh Adhyaksh

Pramukh Adhyaksh
(President)
**G.E.L. Church in Chotanagpur
and Assam, Ranchi**

cc: Dr. Thangaraj
Executive Director
N.L.H. & M.B.
SALUR.