

BURSARY APPLICATION FORM
FY 26-27 (APRIL 2026 – MARCH 2027)

Note: To be eligible for bursary award, it is mandatory to provide the Income Tax documents for FY 2024-2025 (AY 2025-2026) for both parents and paternal grandparents. In case either of the spouses/paternal grandparents has no/only exempt income, then please provide the ITR with NIL income (If no ITR filed for NIL/exempt income, then please provide a certificate from a Chartered Accountant mentioning the income and the source of income).

1. DETAILS OF APPLICANT

Name: _____

School No. & House: _____ Present Form: _____

2. DETAILS OF PARENTS

	Father	Mother
Name		
Residential Address		
PAN		
Aadhaar Card Number		
Passport Number		
Director Identification Number (If applicable)		
Occupation		

a) SERVICE (Please Attach - Form 16, Form-26AS, Copy of full ITR Form, Form ITR V or acknowledgement & computation of income sheet of FY 2024-2025 (AY 2025- 2026). The said documents are required from both Father and Mother).

	Father	Mother
Nature of Service		
Designation		
Name of Employer		
Town/City of Employment		
Annual Income		

- b) PROFESSIONAL** (Please attach – Form 26AS, copy of full ITR Form, Form ITR V, or acknowledgement & computation of income sheet of FY 2024-2025 (AY 2025- 2026). Also attach a copy of Profit & Loss Account & Balance Sheet for FY 2024-2025. The said documents are required from both Father and Mother and the firm.)

	Father	Mother
Nature of Profession		
Any Allied Business		
Town/City		
GSTIN		
Annual Turnover		
Annual Income		

- c) SELF EMPLOYED/BUSINESS** (Please attach – Form 26AS, copy of full ITR Form, Form ITR V or acknowledgement, Computation of income sheet, copy of Profit & Loss Account & Balance Sheet & GSTR 1 of FY 2024-2025 (AY 2025- 2026). The said documents are required from both Father and Mother and the firm.)

	Father	Mother
Name of Business		
Nature of Business		
Type of Business (Sole proprietor/partnership/HUF/LLP/Private Ltd./Public Ltd.)		
GSTIN		
Town/City		
Annual Turnover		
Annual Income		
No. of Directorship in Other companies		
Director Identification Number (if applicable)		

In the case of Partnership Firm/LLP where either Father or Mother are partner(s), please mention the amount of salary drawn from the firm and share in the profits of the firm. Also, please attach audited accounts (if any) of the firm and the full Income Tax Form of FY 2024-2025/AY 2025 2026 , ITR V or acknowledgement and Computation of Income Sheet.

- d) HUF (If either Father or Mother of the candidate is a coparcener/member(s)/Karta of an HUF, then please attach the latest full ITR form, ITR V or acknowledgement, computation of Income Sheet and Profit & Loss Account & Balance Sheet of FY 2024-2025 (AY 2025- 2026) of HUF.**

	Father	Mother
Income		

- e) Agriculturist**

	Father	Mother
Total Land Holding		
Area of Irrigated Land (with location)		
Area of Non-Irrigated Land (with location)		
Area of Orchards (with location)		
Khasra/Khatauni Nos.		
Annual Income		

- f) Details of Paternal Grandparents (Please Attach - Form 16, Form -26AS, Copy of full ITR Form, ITR V or acknowledgement & computation of income sheet of FY 2024-2025 (AY 2025- 2026).**

	Grandfather	Grandmother
Business/Service		
Income		

3. OTHER SOURCES OF INCOME

	Father	Mother
Family		
Income from Trust (as beneficiary)		

4. GROSS ANNUAL INCOME (2+3)

	Father	Mother	Paternal Grandparents
Income			

5. OTHER DECLARATIONS:

- a) Number of cars owned and/or used by the applicant and family members (spouse and children) with make and year: _____
- b) Residential and other properties (give details): _____

6. DETAIL OF ANY SINGLE TRANSACTION ABOVE THAN RS. 10 LACS DURING THE FINANCIAL YEAR (BOTH FATHER & MOTHER)- Please attach Bank Statements of FY 2024-2025 for all bank accounts of Father/Mother

	Amount	Nature
Detail of Single Transaction more than Rs. 10 Lacs		

7. DETAIL OF ANY FOREIGN TRIP MADE BY EITHER PARENT/SIBLING/APPLICANT DURING THE FINANCIAL YEAR 2024-2025

	Trip 1	Trip 2	Trip 3	Trip 4
Person travelled				
Place of Travel				
Date of Travel				
Purpose of Travel				

8. DETAILS OF OTHER SONS STUDYING AT THE DOON SCHOOL

Name	School No. & House	Present Form	Scholarship/Bursary Details	
			Is he currently a recipient of any scholarship/bursary?	If yes, please mention the amount

9. DETAILS OF OTHER SIBLINGS (Other than those studying at The Doon School)

Name	Age	Gender	Class/Course	Name of School/ College/ University	Gross Fee	Scholarship Amount (if any)

10. Reason for need of bursary:_____

11. DECLARATION

I hereby certify that all statements made above are correct and understand that if any of the above information is found incorrect the bursary awarded will be forfeited and the admission offer shall stand revoked as applicable. The information provided herein is subject to scrutiny by the school authorities and at any point of time, if it comes to knowledge of the school, that the income declaration is inaccurate or does not meet the criteria, the parent is liable to refund the entire bursary amount awarded till date.

Parent's name:

Signature:

School No. of Parent (In case of Old Boys):

Date:

Contact No.

Email-id:

DISCLAIMER:

- 1) All bursary offers are subject to review based on the academic performance of the candidate. In case a candidate fails to achieve the minimum requirement of 60% average marks in the annual examination (Preboards to be held in January 2026 for A Form & Trials to be held in March 2026 for other forms), the school reserves the right to withdraw the bursary offer.