



The Bank Of Gotham City

## Application for Study Power

Centre / Branch :

Application ID :

You are applying as a ☐ Salaried - Individual ☐ Self-Employed - Professional ☐ Self-Employed - Others

Are you an existing AXIS Bank Customer? ☐ Yes ☐ No (If Yes, Provide Account No.: )

Dear Sir / Madam,

I/We request you to sanction me/us a loan of Rs.  for the purpose of   
repayable in  months by way of Post-dated Cheques / Deduction from salary by employer (check-off facility) / ECS / SI.

### Personal Details (For individuals Only)

Name of the Applicant :

Title

Surname

First Name

Middle Name

Preferred Name :  Date of Birth : DD:  MM:  YYYY:

Father's / Spouse's Name :

Mother's Maiden Name :

Residence Address :

Landmark :  City :

State :  Pin Code :  Nationality :

Tel. :  (O)  (R) Fax :  Mobile No.:

Pager No.:  E-mail :

Permanent Address :

Landmark :  City :

State :  Pin Code :  Tel. :

### Other Details (Please Tick)

Sex : ☐ Male ☐ Female Marital Status : ☐ Single ☐ Married No. of Children :  No. of Dependents :

Education : ☐ SSC / HSC ☐ Graduate ☐ Post Graduate Institute / University :

PAN Card No.:  Passport No. :  Passport Expiry Date :  /  /

Voter's ID Card No.:  Driving Licence No. :

Occupation : ☐ Doctor ☐ Lawyer ☐ CA ☐ MBA ☐ Engineer ☐ Others (specify)

House Owned by : ☐ Self-Owned ☐ Rented / Self-Leased ☐ Co. Provided / Lease ☐ Parents ☐ Paying Guest

If Rented / Self-Leased, the Monthly Rent Is Rs.:  Years at Current Residence :

Vehicle(s) Owned : ☐ Yes ☐ No If yes, please provide other details

Type of Vehicle : ☐ Two-Wheeler ☐ Four-Wheeler No. of Vehicle(s) Owned :  Hypothecated : ☐ Yes ☐ No

#### Vehicle 1

Model :

Make :

Year of Purchase :

Hypothecated to :

#### Vehicle 2

Model :

Make :

Year of Purchase :

Hypothecated to :

### Co-applicant Details

Co-applicant : ☐ Yes ☐ No If Yes, whether : ☐ Spouse ☐ Parents ☐ Others (please specify) :

Name of the Co-Applicant :

Title

Surname

First Name

Middle Name

(Note : For Co-applicant cases, please fill the separate Co-applicants form)

### Employment / Business Details

If Salaried, Type of Organisation : ☐ Govt. / Public Sector ☐ Pvt. Ltd. ☐ Public Ltd. ☐ MNCs

If Self-Employed, Type of Organisation : ☐ Pvt. Ltd. ☐ Public Ltd. ☐ Partnership ☐ Proprietorship ☐ Others (specify) :

Name of Current Employer / Business :

Office Address :

Landmark :  City :

State :  Pin Code :  Tel. : (O)  Ext.:

Fax :  Mobile No.:  E-mail :

Designation :  Date of joining (for salaried individuals) : DD:  MM:  YYYY:

No. of Years in Current Employment / Business :  Type of Business :

In case Self-Employed, please provide the business commencement date : DD:  MM:  YYYY:

Name & Address of Previous Employer / Business :

City :  State :  Pin Code :  Tel.: (O) :

Designation :  No. of Years in Previous Employment / Business :

Spouse Details

Name of the Spouse :  Date of Birth : DD:  MM:  YYYY:

Is He / She an Earning Member ? If Yes, please provide Net Monthly Income Rs. :

Office Name & Address :

Tel. : (O) :

Financial Details

Salaried  
Gross Monthly Salary : (Rs.)   
Net Monthly Salary : (Rs.)   
Other Income (If any) : (Rs.)

Self-employed  
Gross Monthly Income : (Rs.)   
Net Monthly Income : (Rs.)   
Other Income (If any) : (Rs.)

Investment in Shares / Units / Bank Deposits / Others (Please specify) :

Total Investment In Value : (Rs.)  Are you a Tax Payer ? ☐ Yes ☐ No

Bank and Credit Card Details

	Bank 1 - Primary	Bank 2	Bank 3
Bank Name			
Bank Branch			
Account Type			
Account No.			

Estimated Balance in all Accounts : (Rs.)  As on dated : DD:  MM:  YYYY:

Do you have Credit Cards ? ☐ Yes ☐ No If yes, no. of Credit Cards :

	Card 1	Card 2	Card 3
Visa / Master Card / Amex / Diners Club / Others			
Name of the Bank			
Card No.			
Valid from (mm/yy)			
Valid upto (mm/yy)			
Type of Card			
Credit Limit			
Credit Outstanding			

Loan Servicing Details

Do you have any other Existing Loan(s) ? ☐ Yes ☐ No (If yes, please provide the following details)

**Loan 1**

Loan Type :

Name of Financier :

Monthly Instalment :

Loan Amount :

Current Outstanding :

Balance Months to go :

Date of Loan Availed :

Purpose of Loan :

Have any additional Loan(s) Servicing ? ☐ Yes ☐ No

**Loan 2**

Loan Type :

Name of Financier :

Monthly Instalment :

Loan Amount :

Current Outstanding :

Balance Months to go :

Date of Loan Availed :

Purpose of Loan :

Total Monthly Debt Service amount : Rs.

**Loan Request**

Loan Amount Requested : Rs.		Tenure Requested :		(Months) EMI : (Rs.)	
Mode of receiving Processing Fees :	<input type="checkbox"/> By Cheque	<input type="checkbox"/> Deduct from Disbursement Amount			
Upfront Processing Fees : (Rs.)		Cheque No. :		Date of Receipt :	
Drawn on :				No. of Upfront Instalment(s) :	
Payment To :	<input type="checkbox"/> Customer	<input type="checkbox"/> Bank (In case of Takeover Cases)	<input type="checkbox"/> Other (specify) :		
Disbursal Instructions :	<input type="checkbox"/> Draft / Pay Order, In favour of		A/c No.		
	<input type="checkbox"/> Credit in A/c (AXIS Bank customers only)				
No. of PDCs Received :		Date of PDCs	<input type="checkbox"/> 5 <sup>th</sup>	<input type="checkbox"/> 20 <sup>th</sup>	
PDCs No.:		Bank Name / Address :			
PDCs No.:		Bank Name / Address :			
PDCs No.:		Bank Name / Address :			

**Guarantor Details**

Type of Guarantor :	<input type="checkbox"/> Individual	<input type="checkbox"/> Corporate	Relationship with Applicant :		
Name of Guarantor :			Date of Birth : DD:		MM: <input type="checkbox"/> YYYY: <input type="checkbox"/>
Residence Address :					
	City : <input type="checkbox"/>				
State :		Pin Code :		Tel. : (O) <input type="checkbox"/> (R) <input type="checkbox"/>	
Fax :		Mobile:		Pager No.:	E-mail : <input type="checkbox"/>
Office Address :					
	City : <input type="checkbox"/>				
State :		Pin Code :		Tel. : (O) <input type="checkbox"/> (R) <input type="checkbox"/>	
Fax :		Mobile:		Pager No.:	E-mail : <input type="checkbox"/>
Designation :		No. of Years In Current Employment / Business :			
In case Self-Employed, please provide the business commencement date :	DD: <input type="checkbox"/>	MM: <input type="checkbox"/>	YYYY: <input type="checkbox"/>		
Gross Monthly Salary / Income : (Rs.)		Gross Annual Turnover : (Rs.)			
Net Monthly Salary / Income : (Rs.)		Net Monthly Income : (Rs.)			
Investment in	<input type="checkbox"/> Shares	<input type="checkbox"/> Bonds / Units	<input type="checkbox"/> Bank Deposits	<input type="checkbox"/> NSC	<input type="checkbox"/> Others (Please specify) : <input type="checkbox"/>
Total Investment In Value : (Rs.)		Are you a Tax Payer ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**Would you like to avail of any other facility offered by the Bank ?** ☐ Yes ☐ No If yes, Please tick on relevant boxes.

<input type="checkbox"/> Personal Power	<input type="checkbox"/> Power Homes	<input type="checkbox"/> Consumer Power	<input type="checkbox"/> Power Drive	<input type="checkbox"/> Study Power	<input type="checkbox"/> Financial Advisory Services
<input type="checkbox"/> Savings A/c	<input type="checkbox"/> Current A/c	<input type="checkbox"/> Encash 24	<input type="checkbox"/> Fixed Deposits	<input type="checkbox"/> Recurring Deposits	<input type="checkbox"/> Salary Power
<input type="checkbox"/> Business Classic	<input type="checkbox"/> NRI Services	<input type="checkbox"/> Depository Services	<input type="checkbox"/> iConnect™	<input type="checkbox"/> International Debit Card	<input type="checkbox"/> Medical Equipment
<input type="checkbox"/> Card Power	<input type="checkbox"/> Asset Power				

**Security Document Details**

Security Document :		Ref. No.:		Date of Purchase :	
Security Document :		Ref. No.:		Date of Purchase :	
Security Document :		Ref. No.:		Date of Purchase :	
Security Document :		Ref. No.:		Date of Purchase :	
Total Value of Securities given : Rs.					

**About your references**

(One reference has to be non-relative / non-colleauge)

**Reference 1****Reference 2**

Name :	
Relation with applicant :	
Address :	
	Pin Code :
Tel. (R) :	(O) :
Mobile :	
E-mail :	

Name :	
Relation with applicant :	
Address :	
	Pin Code :
Tel. (R) :	(O) :
Mobile :	
E-mail :	

**Course Details**

(To be filled by DSA / Bane Officer)

Name of Course : Duration of Course :  Commencement Date :  Expected Completion Date : Place of Course : ☐ within India ☐ AbroadName of Institute / College / University : Address of Institute / College / University : City :  State :  Pin Code : Country :  Tel.:  Fax : 

## Break-up of Expected Overall Cost for Course :

Nature of Expenses	Tution / Course	Examination / Other Recurring	Books / Stationery / Equipments	Maintenance Expenditure				Insurance Premia
				Rent	Board	Clothes	Sundries	
Duration	Fees	Fees	Equipments					
1st year Course								
2nd year Course								
3rd year Course								
4th year Course								
5th year Course								

Expected Total Cost

(A) : Rs. 

Less : Non-repaybale Scholarship

(B) : Rs. 

Repayable Loan Scholarship or other financial assistance

(C) : Rs. 

Funds available from Family

(D) : Rs. (E) : Rs. 

Loan Amount Recommended (a-e)

Rs. 

Academic / Other Qualications :

Qualication	Subject	Institute Name and Address	Month and Year of Passing	Marks Obtained	(%) Obtained	Class

Date : Place : 

Applicant's Signature

DSA / Bank Officer Stamp and Signature

**Acknowledgment for Receipt of Application form**

Date: \_\_\_\_\_

To \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AXIS Bank Ltd. has received your application for a \_\_\_\_\_ loan of Rs. \_\_\_\_\_ Lacs.

The Bank would require a processing time of approximately \_\_\_\_\_ working day(s)/week(s) from the date of receipt of the completed application. This is subject to submission of all documents, as required by the bank.

For AXIS Bank Ltd.  
AXIS Bank Official