

FRESH

(incomplete application form will be rejected during Scrutiny)

Paste a Passport size Photo
Counter sign by the head
of the Institution with Seal.

**GOVT. OF NAGALAND
HIGHER EDUCATION
Phone : 0370 - 2271030**

NAGALAND STATE MERIT SCHOLARSHIP

PART - A

(to be filled in by the applicant in her/his own handwriting)

1. Name of the applicant
(In Block/Capital letters) Mr./Smt. : _____
2. Father's Name : _____ Occupation : _____ Designation _____
3. Mother's Name : _____ Occupation : _____ Designation _____
4. Permanent complete address with Phone No. : _____
5. Tribe : _____ Whether indigeneous inhabitant of Nagaland ? Yes/No (tick)
(attach attested ST certificate) (attach attested certificate)
6. Complete address of the institution with STD & Phone Number : _____
7. Particulars of examinations passed commencing from HSLC/equivalent examinations
(Must fill in the following by the applicant) (and attach Certificates & Marksheets)

Name of Exams	Year in which Taken	Division & Marks %	Institution & Board / University	Remark (If any)
i.				
ii.				
iii.				
iv.				

8. Name of the college where admitted : _____
9. Date of admission : _____ ; Expected month/year of entire course completion _____

Note well : A Xerox copy of the recognition letter/permission letter given to the College/Institute//Hr. Sec. School by the Board/Council/University/other Recognised Authority to run/open the course/institute, must be attached, failure of which this form will be rejected during the time of Scrutiny.

(FOR DIRECTORATE OFFICE USE ONLY)



ISSUED BY - _____

RECEIVED BY - _____

Last date of form submission is :

15 NOV 2006

GOVT. OF NAGALAND
 HIGHER EDUCATION
 Phone : 0350 - 24100

10. Whether in receipt of any Stipend/Scholarship? Yes/No. If yes, state the course _____
11. Whether Hosteller ? Yes / No (tick). If yes, attach Certificate from Hostel Warden.

DECLARATION BY THE APPLICANT

The Particulars given above are true and have been filled up in my own hand writing. If the informations are detected as false later on, my application can be rejected/I will refund the scholarship so received.

Place _____ Applicant's Signature - _____

Date _____ Full address of the Institute - _____

PART - B

A. RECOMMENDATION BY THE HEAD OF THE INSTITUTION

I hereby recommend for the award of Nagaland Merit Scholarship to Mr/Ms. _____ who is studying _____ course at _____ (name of the institution) which is recognized/not recognized (tick) by the Govt/Board/University of _____

B. The applicant is required to pay the following compulsory fees to the institution for the current year 200 _____ to 200 _____ :

Note : Fill up item-wise to avoid rejection

Particulars of Non-refundable fees	Rate Per month	Rate per year	Remarks (if any)
1. Tuition fee			
2. Registration fee			
3. Examination fee			
4. Enrolment fee			
5. Games fee			
6. Library fee			
7. STDS Union fee			
8. Magazine fee			
9. Medical fee			
Others :			
10.			
11.			
Total =			



UNDERTAKING TO BE SIGNED BY THE HEAD OF THE INSTITUTION

I UNDERTAKE THAT THE SCHOLARSHIP AMOUNT WILL BE DISBURSED AS SOON AS IT IS RECEIVED. IF THE APPLICANT LEAVES THE INSTITUTION / DISCONTINUES STUDIES / ACCEPT ANY OTHER SCHOLARSHIP / FAIL TO SECURE 60% ATTENDANCE IN THE CLASS / PARTICIPATES IN STRIKES WITHOUT PERMISSION FROM COLLEGE AUTHORITY, THE FACT WILL BE REPORTED TO THE DIRECTOR OF HIGHER EDUCATION, NAGALAND, KOHIMA, AND THE UNDISBURSED AMOUNT WILL BE REFUNDED TO THE SENDING AUTHORITY IMMEDIATELY.

1. Name of the applicant _____
 Place _____ SIGNATURE OF THE HEAD OF THE INSTITUTION _____
 Date _____ NAME IN CAPITAL LETTER : _____ Designation _____
 Office Seal _____ DESIGNATION & ADDRESS : _____

5. To : _____ Whether indigenous inhabitant of Nagaland? Yes/No (tick) _____

C. Branch of the State Bank of India through which the remittance of scholarship is preferred _____

D. The designation and full address of the Head of the Institution to whom the Scholarship amount in respect of the student(s) may be sent ? _____

(Fill up the following by the applicant) (and attach Certificates & Marksheet)
 Name- _____ Designation- _____ Address- _____

Name of Exams	Year in which taken	Division & Marks %	Institution & Board / University	Remark (If any)
APPLICANT MUST TAKE NOTE OF THE FOLLOWING GUIDE-RULES				
DURING THE TIME OF SCRUTINY THE SCHOLARSHIP FORM(S) WILL BE REJECTED IF ANY ONE OR MORE OF THE FOLLOWING ARE DETECTED :				
1.	IF ANY LOCAL WHO IS NOT A FIRST DIVISIONER IN HSLC/HSSLC/DEGREE APPLY FOR THIS SCHOLARSHIP.			
2.	IF ANY NON-LOCAL, WHO DOES NOT COME WITHIN THE TOP TEN NAMES IN CLASS 10 RESULT CONDUCTED BY THE NAGALAND BOARD OF SCHOOL EDUCATION APPLY FOR MERIT SCHOLARSHIP. (THAT THE APPLICANT IS WITHIN THE TOP TEN CATEGORY MUST BE PROVED BY PRODUCING A XEROX COPY OF THE RESULT SHEET. IF NOT, THE FORM WILL BE REJECTED.			
3.	IF ANY OF THE ATTACHED DOCUMENTS IS NOT ATTESTED BY A GAZETTED OFFICER.			
4.	IF THE PHOTOGRAPH IS NOT FOUND PASTED ON THE APPLICATION FORM.			
5.	IF THE PASTED PHOTOGRAPH IS NOT COUNTERSIGNED BY THE HEAD OF THE INSTITUTION.			
6.	IF THE ATTESTED COPY OF THE SCHEDULED TRIBE CERTIFICATE IS NOT ENCLOSED.			
7.	IF THE ATTESTED COPY OF THE INDIGENEOUS CERTIFICATE IS NOT ENCLOSED.			
8.	IF THE ATTESTED COPIES OF CERTIFICATES/MARKSHEETS COMMENCING FROM HSLC (CLASS 10) ARE NOT ENCLOSED.			
9.	IF THE HEAD OF THE INSTITUTION USES THE RUBBER SIGNATURE IN PLACE OF HIS/HER ORIGINAL SIGNATURE.			
10.	IF A COPY OF THE RECOGNITION LETTER OF THE INSTITUTE IS NOT ENCLOSED.			
11.	IF THE COLUMN, NAMELY, particulars of the examination commencing from HSLC is not filled up properly by the applicant.			