

GOVT. OF NAGALAND
HIGHER EDUCATION
Phone : 0370 - 2271030

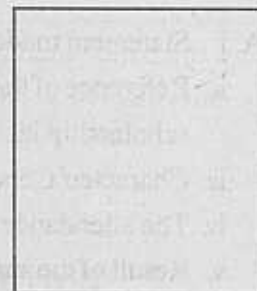
RENEWAL

(incomplete application form will be rejected during Scrutiny)

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

NAGALAND STATE MERIT SCHOLARSHIP

PART - A



(this application form will be rejected if the PART-A is not fill up by the applicant in his/
her own handwriting)

Madam/Sir,

I was in receipt of Nagaland Merit Scholarship last year for the study
of..... course, at college/Hr. SS/ Institute
and I am studying this year in class of that continuous course in the same institution / in
another institution

I therefore, request that my scholarship may be renewed for the current session with effect from
200..... to 200.....

Yours faithfully,

Applicant's Signature-

1. Full name in Capital letters: Mr/Miss/Smt:
2. Father's /Husband's name:
3. Tribe : (enclose attested ST Certificate)
4. Permanent settled in (give full address):.....
(enclose attested Indigeneous certificate)
5. Give full address (of your institution of study) :

(BELOW FOR DIRECTORATE OFFICE USE ONLY)

OFFICE SEAL

ISSUED BY -

RECEIVED BY-

Last date of form submission is :

15 NOV 2006



PART - B

(RECOMMENDATION BY THE HEAD OF THE INSTITUTION)

- A. i. Statement made by the candidate in Part-A are: CORRECT / NOT CORRECT (Tick).
 ii. Reference of the sanction Order under which awarded scholarship last year Letter NO:
 iii. Character/ Conduct of the applicant is.: SATISFACTORY / NOT SATISFACTORY (Tick)
 iv. The attendance of the applicant is: BELOW 60% / ABOVE 60% (Tick).
 v. Result of the annual examination of class attended : PROMOTED / DETAINED (Tick)
 vi. Class to which promoted :
 vii. Date of promotion and Joining the classes.....:
 viii. If failed, how many times: First / Second / Third (Tick)
 ix. Month and year in which the examination of the current session will be over:
- B. i. Whether the applicant is residing in the Hostel of the institution/ or other recognized Hostel? If yes, attach a certificate from the Warden of the Hostel to that effect.
- C. i. Nearest Branch of the State Bank of India the through which scholarship payment is required?

 ii. Designation and full address of the Head of the institution to whom the scholarship in respect of the student may be sent?
- D. The applicant is required to pay the following compulsory fees during the current year from 200..... to 200..... as per detail given below: **NOTE: FILL UP ITEM-WISE TO AVOID REJECTION**

NON-REFUNDABLE FEES	RATE PER MONTH	PER YEAR	TOTAL	Remarks (if any)
1. Tuition fee				
2. Registration fee				
3. Examiantion fee				
4. Enrolment fee				
5. Games fee				
6. Library fee				
7. STDS Union fee				
8. Magazine fee				
9. Medical fee				
Others				
10.				
11.				
			Total =	

CERTIFICATE TO BE SIGNED BY THE HEAD OF THE INSTITUTION:

Certified that the institution is affiliated to
..... Board/ University (Write in expanded form) and is recognized govt. of
The candidate was last year awarded the Nagaland Merit Scholarship for studying
..... course in this Institution and Receipt of the same is shown in
ANNEXURE-I below.

UNDERTAKING TO BE GIVEN 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.

PLACE- _____ SIGNATURE OF THE HEAD OF THE INSTITUTION
DATE- _____ Name in Capital letter : _____
OFFICE SEAL _____ Designation & Address : _____
STD & Phone Number : _____

ANNEXURE- I (to be signed by student):

RECEIVED FROM THE DIRECTORATE OF HIGHER EDUCATION AN AMOUNT OF
Rs..... (Rupees.....) ONLY
IN FULL / PART PAYMENT TO ME VIDE Letter NO..... DATE
FOR 200..... TO 200..... SESSION FOR THE STUDY OF
COURSE THROUGH THE PRINCIPAL/ DEAN / REGISTRAR / HOD OF THE
COLLEGE / SCHOOL / UNIV.

DATE: _____
PLACE: _____ STUDENT'S SIGNATURE-
FULL NAME IN CAPITAL LETTER-

CLASS- _____ ROLL NO-

ANNEXURE-II : (TO BE DONE BY HEAD OF THE INSTITUTE):

Particulars of Final / Promotion examination in respect of Mr/Miss/Smt.....
of of college /Hr. S.S./Univ. are given below:

NAME OF EXAMINATION	INSTITUTION/ BOARD/UNIVERSITY	YEAR IN WHICH TAKEN	AGGREGATE MARKS OBTAINED	OVERALL PERCENTAGE OF MARKS	RESULT
					Passed/ Failed. (tick)

OFFICE SEAL

Signature of Head of Institute & Date-
Designation-
Institution-

NOTE WELL: SCHOLARSHIP FORM(S) WILL BE REJECTED DURING SCRUTINY IF ONE OR MORE OF THE FOLLOWING DEFECTS ARE DETECTED:

1. IF THE PASSPORT SIZE PHOTO IS NOT FOUND PASTED.
2. IF THE PASTED PHOTO IS NOT COUNTERSIGNED & SEAL BY HEAD OF THE INSTITUTE.
3. IF THE RUBBER STAMP SIGNATURE IS USED BY THE HEAD OF THE INSTITUTE.
4. IF THE SPACE affiliated to Board/University IS FOUND BLANK/ INCOMPLETE.
HOWEVER, IF THE RECOGNITION LETTER IS ENCLOSED SEPARATELY, IT WILL ALSO BE ACCEPTED.
5. IF ATTESTED COPIES OF ADMIT CARD/MARK SHEET/ PASS CERTIFICATE OF THE PREVIOUS/ PRECEDING YEAR IS NOT FOUND ENCLOSED.
6. IF, IN THE FORM UNDER PART-B, WHICH IS TO BE FILLED IN BY THE HEAD OF THE INSTITUTION, THE FOLLOWING ARE NOT DONE, THE FORM WILL BE REJECTED:
 - A. i. STATEMENT MADE BY CANDIDATE IN PART-A are: correct / incorrect
 - ii. CHARACTER/CONDUCT OF THE APPLICANT is: satisfactory/dissatisfactory
 - iii. Attendance of the applicant is BELOW 60% /ABOVE 60%.
7. If the Part-A is not fill up by the applicant in his/her own handwriting.
