

Performa for renewal

SPECIAL SCHOLARSHIP SCHEME FOR NORTH EASTERN REGION

Name of student:_		
Award letter number	er and date: (to be filled after the	selection)
Candidate ID numb	oer	
This is to certify that Mr./Ms.		S/o/D/o
is a bonafied student of		_year regular, undergraduate degree course
-	in the subject of _	He / She has passed
joined the yea	ar Undergraduate degre	e examination in
this Institution/Colle	ege/Department	
affiliated to		University. He /She has
secured	Marks/CGPA.	
(Note:-Mark sheet	of the passed for previou	us year is to be attached.
Signature	Signature	Signature
Name Date	Name Date	Name Date
(Awardee)	(Head of Deptt.)	
Ph. /Mobile No.	Seal of HoD	Seal of University / Institution / College
e-mail:	Ph. No.	Ph. No.
Bank A/c No. IFSC Code : MICRcode:		
12-digit unique (aadhaar)	number, if you have:	