

**GOVERNMENT OF TRIPURA
DIRECTORATE OF HIGHER EDUCATION**

APPLICATION FORM OF GIRLS' STIPEND

1. Name in full (in block letter) :--
2. Place & Date of Birth :--
3. Nationality (An attested of the Certificate is to be furnished from the competent authority) :--
4. Full Address :-- (i) Present :--

(ii) Permanent :--

(A certificate from M. P./M. L. A/Magistrate/ Member of A.D.C./N.A.A./Municipality Commissioner/any Gazetted Officer's to be furnished to the effect that he/she is a permanent resident of Tripura).

5. Father's name in full :--
- (b) Nationality :--
- (c) Occupation :--
- (d) (i) Present Address :--
- (ii) Permanent Address :--

(A certificate from M. P./M. L. A/Magistrate/ Member of A.D.C./N.A.A./Municipality Commissioner/any Gazetted Officer to be furnished to the effect that he/she is a permanent resident of Tripura.

6. Total monthly income from all sources of parents :--

7. Particulars of School/College/University etc. where studied :--

Name of the School/College/ Institution.	Date of entering.	Date of leaving	Year	Remarks.

8. Particulars of all examination passed commencing with Matriculation or equivalent examination. (Copies of Marks sheets are to be attached)

Name of Examination	University/ Board	Year of Passing	Roll No.	Class or Div. with percentage of Marks	Subject taken	Remarks.
1	2	3	4	5	6	7

- 9(a) Name and address of the Institutions where admission has been secured for the current academic session :-
- (b) Date of Admission :-
- (c) No years required for the completion of the course :-
- (d) Course and subject taken :-
- (e) Date of Commencement of session :-
- (f) Year in which the final examination completion of the full course will be held. :-
10. If the applicant is in receipt of any other scholarship or financial assistances from State Govt. /University or other Instt. or person, full particulars should be given including the monthly rate and the date of award etc. :-
11. List of documents attached :- 1

I hereby declare that the statement made by me in this application form are true to the best of my knowledge and belief. I further agree to abide by the terms and conditions of the award if I am selected for stipends applied for.

Date :-

Place :-

(Signature of Applicant)

TO BE FILLED IN BY THE HEAD OF THE INSTITUTION.

1. Designation and full postal address of the Institution to which the scholarship/stipend amount etc. will be sent for disbursement to applicant Postal Pin code No. :-
2. Name of the nearest branch of the State Bank of India of the Government Treasury through which the payment of scholarship/ stipend in desired S.B.I. Code No. :-
3. *Student S.B.I. A/c No. Photo copy of S.B.I. pass book*
 Certified that Sri/Smti.....
 was admitted into my Institution (Name).....
 as a regular full time student in Class.....
 w.e.f..... and her tuition fees is Rs..... per month.

Signature of the Head of the Institution with Seal.