

**APPLICATION FORM FOR COMBINED MERIT SCHOLARSHIPS FOR THE YEAR
2017-2018 UNDER DIRECTORATE OF HIGHER EDUCATION, ASSAM**

PHOTOGRAPH

1. Name of candidate (In block letter) :
2. Father/Mother/Husband's Name with Permanent Address :
3. Present address for communication :
4. Name of Institution with address with PIN code No (in full) :
5. Contact No. of the Student (Mobile) :
6. a) Name of the Course studying (Degree / P.G) :
b) Duration of the course :
c) Class in which at present studying :
d) Date of admission in the course (mandatory) :
7. Age on 1st March,2017 :
8. Religion :

Education Qualification (Enclose all examination passed commencing from HSLC/HSSLC equivalent Examination with attested copies of mark-sheets)

Sl. No.	Name of Exam. Passed	Name of University / Board	Year of passing	Class / Division secured	Total marks obtained in aggregate	Full marks of examination	Obtained (Percentage)	Position
1	H.S.							
2	DEGREE							

9. Are you a permanent resident of the State of Assam : Yes / No.
(If "Yes" attach attested copy of Permanent Residence Certificate from D.C./S.D.O. (Civil)/Affidavit is mandatory)

10. The required records are mandatory with Photostat copy of 1st page of Bank passbook: (SBI Account Mandatory)

Name of the Applicant	Name of the Bank	Bank Account Number	Branch Name	Bank Code No.	IFSC Code No.	MICR Code No	Remarks

I hereby apply for the State Government Combined Merit Scholarship for the year and the declaration above is true to my knowledge.

Date :

Signature of the applicant

CERTIFICATE FROM THE HEAD OF THE INSTITUTION IN WHICH THE CANDIDATE IS NOW STUDYING

It is certified that Mr. /Ms., Son/Daughter of is a Bonafide student of College (Name of the College). His / Her roll number is and he/ she is studying in the (Name of Degree/P.G. Course) (Semester). He / she has joined this College in the Academic Year

This is also certified that College is a Govt./ Provincialised College in the State of Assam. His / Her conduct and character is good / satisfactory. I recommended / do not recommended him / her for the Scholarship.

Seal of the Office

Date : No.

Signature of the Head of the Institution with date and seal