



राष्ट्रीय प्रौद्योगिकी संस्थान अगर्तला
NATIONAL INSTITUTE OF TECHNOLOGY AGARTALA

Barjala, Jirania, Agartala – 799046 (Tripura)

STIPEND AND SCHOLARSHIP SECTION

E-mail: - nita.scholarship@gmail.com

F. NITA.8 (17-~~stip~~)/ All Notice/2013-14 / 0722-26

Dated:- 09 / 11 / 2015

NOTICE

This is for information of all the students belongs to general category that, Directorate of Higher Education, Government of Tripura, Agartala, Tripura West has requested for submission of Post-Madhyamik Scholarship application forms (**FRESH/RENEWAL**) as per prescribed format from all the eligible students of this institute **on or before 25th November, 2015 for the academic session 2015-16.**

Therefore, it is instructed to all the students concerned to fill up the forms as per prescribed format which is available in the institute website and should submit their application form with all the relevant enclosures (as per list mentioned in the application form) in the stipend section on or before 25th November, 2015

Application received after last date will not be entertained by the stipend section.


9/11/15

(Tanmoy Ghosal)

Assistant Registrar (Acad.) &
In-Charge Stipend & Scholarship Sec.
NIT Agartala

Encl: As stated above

Copy to :-

1. The Director NIT, Agartala for kind information
2. The Registrar, NIT, Agartala for kind information
3. System Administrator for information with a request to upload the notice in the institute website
4. All Notice boards
5. Post-Madhyamik Scholarship file.

Annual Progress Report of the Scholarship in Respect of renewal Post Madhyamik Stipend.

1. Name of the Scholar :-
(In Block letters)
2. Name of the University/Institute/College :-
(Full Postal address & Pin No)
3. Name of the Annual / Final Examination Passed :-
4. Date on which the scholar's Examination was over :-
(Including practical's)
5. Class / Division Secured (if only grades are allotted
the exploration of the those grade as given in the
Mark Sheet must be attached) :-
6. Mark Secured :-
7. Percentage of Mark :-
8. Class to be which promoted during the current
Academic Session :-
9. Date of joining this Class (if the Class has not
Started, likely date of the start of the Class) :-
10. Total duration of the course in which studying or
To which admitted after passing the examination in Col. 3:-
11. Date of which the final University/ Institute
Examination on completion of the full course will be held:-
12. Date of Commencement of the session :-
13. Character and conduct no the Scholar (General review) :-

14. Whether the scholar is in receipt of any scholarship / stipend / free studentship / employment etc. from any source except this Administration stipend. If so, the nature & amount of such Scholarship(S) :-
15. Specific recommendation of the Head of the Institute / Principal etc. for the continuation of the stipend :-
16. If the scholar is residing in the recognized Hostel of the Institution. If so from when :-
17. Last sanctioning Memo No. & date with Sl. No. May be quoted :-
18. Nearest S.B.I. Branch of the college & S.B.I. Code No. :-
19. Students Bank A/C No. :-
Name of Bank & Branch :-
IFSC Code No :-
Aadhar No :-

Date :-

Office Seal

Signature
(Full name of the Head of the
Institute / Principal) Designation.

Note :- The form must be completed in all respect.

**GOVERNMENT OF TRIPURA
DIRECTORATE OF HIGHER EDUCATION**

**Application Form for the Tripura Post Madhyamik Stipend (For
Professional course inside / outside the State of Tripura) Fresh**

1. Name in full (in block letter):-
2. Place & date of birth:-
3. Whether he / she belongs to Sch. Caste / Sch. Tribes (if so
A certificate from S. D.O /MLA/MP/ant Gazettes officer /
Commissioner of Agartala Municipality / Member of ADC/
Member of NAC is to be furnished) :-
4. Nationality :-
 - i) An attested copy of the Nationality certificate is to be furnished:-
 - ii) A certificate from MP/MLA/SDO any Gazettes Officer/ Commissioner of Agartala Municipality /
Member of ADC/ Member of NAC of he /she area concerned is to be furnished to the effect that he
/she is a permanent resident of Tripura:-
5. Full Address:-
 - a) Present:-
 - b) Permanent:-
6. Father's name in full:-
 - a) Nationality:-
 - b) Occupation:-
 - c) Address (if dead please present the last address
and occupation before death)

Permanent:-

(A certificate from SDO/MLA/MP/any Gazetted Officer /
Commissioner/Agartala Municipality/Member of ADC/
Member of NAC of his area concerned to the effect
that he is a permanent of Tripura is to be submitted).

7. Give full occupation and complete postal address of your Guardian.

8. Partucykars if School/College/University etc. where you studied (any break in the education career should be indicated in the remarks column).

Name of School College	Date of entrance	Date of leaving	REMARKS

9. Particulars of all examination passed commencing from Matriculation or equivalent examination (Attested copies of mark sheets should be furnished)

Name of examination	Board/University	Year of Roll Passing No	Class or Div. with percentage of marks	SUBJECT TAKEN

If any examination was not passed at 1st attempt the fact should clearly be stated.

10. (a) Name and address of the Institution where admission has been secured.
- (b) Date of Commencement of the session.
- (c) Date of Admission
- (d) Course and subjects taken
- (e) No. of years required for the completion of the course
- (f) Year in which the final examination of completion of the full course will be held.

11. If the applicant is in receipt of any other scholarship or financial assistant from State Govt./University/ Institution or persons, full particulars should be given including the monthly rate and date of award etc.

12. Students Bank A/C No. :-
Name of Bank & Branch :-
IFSC Code No :-

13. List of documents attached:-

(a)

(b)

(c)

(d)

14. I hereby declare that the statements 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

(Signature of the applicant)

Date :-

TO BE FILLED IN BY THE HEAD OF THE INSTITUTION

1. Designation and full postal address of the authority/ Head of the Institution to which the scholarship amount etc. will be sent for disbursement to the applicant.

2. Name of the nearest branch of the State Bank of India or Govt. Treasury through which the payment of stipend is desired.

Certified that Sri/ Smt.....

Was admitted into any institution (name).....

As a regular full time student in Class..... on.....

During the session commencing from

(Signature of the Head of the Institution)

Date :-