

**APPLICATION FOR MERIT SCHOLARSHIPS – STIPEND & BOOK-GRANT FOR  
THE STUDENTS OF MEGHALAYA UNDER NEC SCHEME**

200\_\_ – 200\_\_

I APPLICATION MUST BE SUBMITTED THROUGH THE HEAD OF THE INSTITUTION JOINED BY HIM/HER

II THE APPLICATION (SUBMITTED THROUGH THE HEAD OF THE INSTITUTION) SHOULD BE REACH THE OFFICE OF THE DIRECTOR OF HIGHER & TECHNICAL EDUCATION, MEGHALAYA, SHILLONG – 793001 WITHIN \_\_\_\_\_

III THE STUDENT MUST NOT BE IN RECEIPT OF ANY OTHER FINANCIAL ASSISTANCE FROM ANY OTHER SOURCE EXCEPT NATIONAL OR STATE MERIT SCHOLARSHIP

*Attested  
Passport Size  
Photograph  
To be  
Pasted here*

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1. Name of the applicant in full : Shri/Smti/Kum .....

(in Block Capital Letter)

(a) Present address in full : Village/Town ..... P.O .....

District ..... State .....

(b) Permanent Address in full : Village/Town ..... P.O .....

(copy of PRC or ST/SC/OBC certificate to be enclosed) District ..... State .....

(c) Exact date of birth in (in Christian era) : .....

(Certificate to be enclosed)

(d) Whether the applicant is employed : Yes / No

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2. Father's name in full : Shri .....

(a) Present Address in full : Village/Town ..... P.O .....

District ..... State .....

(b) Permanent Address in full : Village/Town ..... P.O .....

District ..... State .....

(c) Profession stating designation (if any) .....

and address in full .....

3. Particulars of Scholl/Colleges/Institution last attended: -
- (a) Name of the School/College last attended .....
  - (b) Date of entry (with Class) .....
  - (c) Date of Leaving .....

4. Did a candidate migrate or was transferred from one Institution to another within the prescribed course of study .....

If yes, please indicate : -

- (i) Transferred from .....(School/College) with effect from ..... And admitted in ..... (School/College) with effect from .....
- (ii) State the reason of migration or transfer from one Institution to another .....
- (iii) Did the transfer from one institution to another, is authorized by the Inspector of Schools or any competent Authority? .....

If yes, please furnish the Memo No. and date of the Orders under which the transfer is authorized by the Competent Authority:

.....  
 .....

5. Particulars of the last University/Board Examination:
- (a) Name of the examination passed .....
  - (b) Year of passing .....
  - (c) Name of the Institution from which appeared in the examination and passed. ....
  - (d) Name of the University/Board which conducted the examination taken by the candidate. ....
  - (e) Roll No. of candidate in the University/Board examination. ....
  - (f) Total Marks for the examination .....

- (g) Total number of marks secured in the examination including excess marks over the pass marks in the optional papers. ....
  - (h) Division of class obtained in the examination. ....
  - (i) Percentage of marks obtained in the aggregate. (Attested copy of Marksheets is to be attached). ....
  - (j) Did a candidate pass the examination at (a) above in the FIRST ATTEMPT or in more than one attempt? ....
  - (k) Did a candidate appear and pass the examination at (a) above as a REGULAR CANDIDATE OR PRIVATE CANDIDATE? .....
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6. Whether the candidate is in received of any other scholarship (Yes or No) .....

If yes, please give details : -

(a) Name of the Scholarship Scheme .....

(b) Course of study for which the Scholarship is awarded. ....

(c) Year of award .....

(d) Sanctioning No. and date .....

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7. Particulars of the Course undertaken: -

(a) Course of study undertaken .....

(b) Class in which studying this year .....

(c) Subject of the course of study taken .....  
at (a) above.

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8. Certify that the statement made by me in this form is correct.

I declared that in case I am selected for the scholarship, I shall devote my full time to the Course of study, and that I shall not receive any other scholarship from any other source.

*Place* .....

*Date* .....

.....  
*Full Signature of the Candidate*

*Enclosure: -*

(1) .....

(2) .....

(3) .....

**SCHEDULED TRIBE AND CITIZENSHIP CERTIFICATE**

- Note: -
- (i) *This certificate should be signed by either of the following:-  
Deputy Commissioner/Addl. Deputy Commissioner/Sub-Divisional Officer (Civil)  
(where the parent/Guardian is permanently residing)*
  - (ii) *This a very important document as the scholarship is awarded mainly on the basis  
of this certificate. The issuing authority is, therefore, advised to issue this  
certificate with due caution.*

I Certify that to the best of my knowledge:-

(1) Shri / Kumari / Shrimati(name of the student).....  
..... son/daughter/wife of Shri (name of  
father/husband) ..... A permanent resident of  
..... Village/town .....  
Mauza/Ward No ..... P.S. ....  
District ..... State ..... is a citizen of India.

**OR**

(2) Shri/Kumari/Shrimati. ....  
(Name of the student) belongs to the tribe.....  
and Sub-Tribe (if any)..... of the recognized Scheduled Tribes of Meghalaya.

His/her religion is .....

Place.....

Date .....

\* *Signature of the issuing authority.....*

*Full name in Capital letter.....*

*Designation .....*

*Address in full .....*

\*\* SEAL

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\* *Stamped signature will not be accepted*

\*\* *Certificate not bearing the seal of the issuing authority, if that be a gazetted officer, will not be accepted. Others may also affix seal, available.*

**ANNEXURE – ‘B’**

**JOINING REPORT**

This is to certify that Shri/Smti/Kum \_\_\_\_\_  
Son/daughter of Shri \_\_\_\_\_ has been granted admission  
In this Institution for the \_\_\_\_\_ Course and has joined the  
\_\_\_\_\_ Class with effect from \_\_\_\_\_

- (i) The duration of the Course which the student is studying in this Institution is \_\_\_\_\_ years and date of commencement of the academic session is \_\_\_\_\_
- (ii) The subject of the Course of Study at (i) above taken by the Student \_\_\_\_\_
- (iii) The Course of study in Degree/Diploma/Certificate/Trade Course (Cross out which is not applicable).
- (iv) The name of the nearest Branch of the State Bank of India or Government Treasury through which the payment of Scholarship is desired \_\_\_\_\_

- (v) The Designation and full address of the Head of the Institution to where the Scholarship amount in respect of the student may be sent:

\_\_\_\_\_  
\_\_\_\_\_

I also certified that this Institution is affiliated to the \_\_\_\_\_  
\_\_\_\_\_ University/Board and is recognized by the Government of India/  
State Government of \_\_\_\_\_

No. \_\_\_\_\_

Place \_\_\_\_\_

\_\_\_\_\_  
*Signature of the Head of the Institution*

Date \_\_\_\_\_

*Name in Capital Letter* \_\_\_\_\_

\_\_\_\_\_  
*Address* \_\_\_\_\_

\_\_\_\_\_

*SEAL OF THE INSTITUTION*

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**FOR USE IN THE OFFICE OF THE DIRECTOR OF HIGHER & TECHNICAL EDUCATION  
MEGHALAYA ::::: SHILLONG**

**In case the application is found to be incomplete, reasons of objection:-**

*Amount passed for payment Rs.* \_\_\_\_\_

*(Rupees \_\_\_\_\_)*

*Checked by:*

\_\_\_\_\_  
*Dealing Assistant*

*Dy. Director of Higher and Technical Education  
Meghalaya ::::: Shillong.*