



Government of Orissa
School & Mass Education Department

**FORM FOR ANNUAL PROGRESS REPORT OF THE DISABLED SCHOLAR
FOR THE YEAR ENDING**

1. Name of the scholar
2. Nature of handicap
3. Course of study / training pursued
4. Date of joining the course in your institution
5. Present standard class of study
6. Exact date of joining present standard
7. Approximate date of conclusion of course in your institution.
8. (i) Date of commencement and termination of examination, State whether the examination was a public one or otherwise.
- (ii) Result of the examination and comments (Enclose mark list)
9. (i) Whether scholarship sought readmission after annual public examination and if so the date of rejoining the institution. Yes No
- (ii) Whether scholar was consciously on the rolls of the institution. Yes No
- (a) If not indicate the reasons of absence and the period of absence.
10. Any warning /caution issued to the scholar for poor progress of studies/ poor conduct or for other reasons give details .

11. Please state if the scholar is in receipt of financial assistance from any other source , if so the name of source , the amount per month / any other details may be indicated.

Yes No

12 Whether the scholar is continuously residing in approved hostel , if so , date from which residing .

Yes No

13. Any other remark.

Signature of the Head of the Institution

Seal of the Institution

Date

Place