

FORM FOR GRANT OF ADDITIONAL SCHOLARSHIP

1. Name of Nicobarese student LILY IRISES
2. Age 21
3. Sex FEMALE
4. Father's Name SHRI PHANUEL
5. Name of village KIKMAI
6. Name of Island CAR-NICOBAR
7. Name of College J.N.R.M
8. Class B.A 1st YR
9. Main subject POL / SCIENCE
10. Whether getting any scholarship from Govt. College (Tick Mark) ✓
Yes/No 4
11. If yes, amount of Scholarship per month. ~~Rs~~ 650/- (Hostel Stipend)

[Signature]
Signature of Student.

Countersigned.

[Signature]
Principal

ज. ने. रा. म. / J. N. R. M.
पोट ब्लेयर / Port Blair.

[Signature]
Senior
HOD, Pol. Science