FORM FOR GRANT OF ADDITIONAL SCHOARSHIP

1.	Name of Nicobarese student	MIZPAH
2.	Age	. 20
3.	Sex	. FEMALE
4.	Father's Name	SHRI LAWRENCE
5.	Name of village	JAYANTHY VILL
б.	Name of Island	CAR NICOBAR
7.	Name of College	J. N. R. M
8.	Class	134 B. COM
9.	Main subject	MAIN COMMERCE
10.	Whether getting any scholarship from Govt. College (Tick Mark)	: Yes/No
11.	If yes, amount of Scholarship per month.	i
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Signature of Student.

Countersigned.

Walter Principal ज. ने. च. म. / J. N. R. M. पोर्ट क्षेत्रर / Pon Blair.

DR. N. RAJAVEL

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