CDANT

FORM FOR GRANT OF ADDITIONAL SCHOARSHIP

1.	Name of Nicobarese student	PATRICIA
2.	Age	23
3.	Sex	FEMALE
4.	Father's Name	SHRI WELLINGTON
5.	Name of village	KINYUKA
6.	Name of Island	CAR NICOBAR
7.	Name of College	J.N.R.M
8.	Class	II and year.
9.	Main subject	BSC HOME SCIENCE
10.	Whether getting any scholarship from Govt. College (Tick Mark)	: Yes/No
11.	If yes, amount of Scholarship per month.	#500/-
		Sover

29/11/08 Os. Rakus Heri Lecture Intise J. W. n. m.

DT STANKLIMAR
H.O.D., Dept. of Plant Science
JNRM (Govt. College)
PORT BLAIR - 744 104.

Countersigned.

Signature of Student.

ज्ञानियां प्रति । प्र