FORM FOR GRANT OF ADDITIONAL SCHOARSHIP

1.	Name of Nicobarese student	FLORENCE
2.	Age	23 NRS
3.	Sex	FEMALE
4.	Father's Name	SHRI JOHNIE
5.	Name of village	BIG LAPATHY
6.	Name of Island	CAR NICOBAR
7.	Name of College	J.N.R.M. COLLEGE
8.	Class	SECOND YEAR
9.	Main subject	HINDS
10.	Whether getting any scholarship from Govt. College (Tick Mark)	. Veg/Ne
11.	If yes, amount of Scholarship per month.	Yes/No

Signature of Student.

Countersigned.

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