

## FORM FOR GRANT OF ADDITIONAL SCHOLARSHIP

1. Name of Nicobarese student ..... RACHEL .....
2. Age ..... 22 YRS .....
3. Sex ..... FEMALE .....
4. Father's Name ..... SHRI BARNABAS .....
5. Name of village ..... PERKA .....
6. Name of Island ..... CAR NICOBAR .....
7. Name of College ..... J. N. R. M. .....
8. Class ..... B.A FINAL YEAR .....
9. Main subject ..... ENGLISH .....
10. Whether getting any scholarship from Govt. College (Tick Mark) ..... ☒ Yes/No
11. If yes, amount of Scholarship per month. .... 650 .....

*Indul*

*Shree*  
Signature of Student.

N. Francis Xavier  
HOD English  
JNRM, Port Blair

Countersigned

*Shree*  
Principal  
ज. न. र. म. / J. N. R. M.  
पोर्ट ब्लेयर / Port Blair