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FORM FOR GRANT OF ADDITIONAL SCHOARSHIP

1.	Name of Nicobarese student	EVELYN LAMSON
2.	Age	23
3.	Sex	:F.M
4.	Father's Name	LAMSON JACOB
5.	Name of village	MUS VILLAGE
6.	Name of Island	CAR NILOBAR
7.	Name of College	J.N.R.M
8.	Class	B.A FINAL YEAR
9.	Main subject	BAENGLISH FINAL YEAR
10.	Whether getting any scholarship from Govt. College (Tick Mark)	: Yes/No
11.	If yes, amount of Scholarship per month.	:
_		Signature of Student.

N. Francis Kavier N. HOD English JNRM, Port Blair

Countersigned.

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