## APPLICATION FORM FOR ONE TIME INCENTIVE TO THE CHILDREN OF FATAL VICTIM OF TERRORISM FOR 2014-15

1	I. Name of candidates : Sri/Smti (in Block Letter)							RECENT PASSPORT SIZE COLOURED PHOTOGRAPH	
2	. Name of Ins	stitution :							
	Address of	the Instituti	on:						
3		- tudy in whic Subject/Bra	ch admitte	ed in this s	ession :				
	(c) (	Class in whic	ch at prese	ent studyir	ng :				
	(d) I	Date of joini	ng the cou	irse : _					
4	- Father's Na	ame : L	ate/Sri _						
5	. Permanen	t Home addr	ess : _						
6	5. Present a		Post office	e, Police Sta		ct, State to be n	-		
7	7. Age on Jai	nuary, 2014 Nal Qualifica		years	month	ıs da <u>ı</u>	ys.		
		-		<u> </u>				<b>D</b>	
Sl. No.	Name of Examination passed	Name of university /Board	Year of passing	Class/ Division Secured	Total marks obtained in aggregate	Full marks for examination	Percentage	Position	

(Give details of all examination passed commencing from HSLC/HSSLC/equivalent Examination with attested copies of mark-sheets).

## 9. Are you a permanent resident of the State of Assam: \_\_\_\_\_ Yes/No.

If "Yes" attach attested Copy of Permanent Residential Certificate from D.C/S.D.O. (Civil)

I hereby apply for State Government one time incentive to the children of Fatal Victim of terrorism for studying in the \_\_\_\_\_\_. Also certified that the particulars given above by me are true to my knowledge and belief

Dated \_\_\_\_\_

Signature of the applicant

## CERTIFICATE FROM THE HEAD OF THE INSTITUTION IN WHICH THE CANDIDATE IS NOW STUDYING

Certified that Shri/Smti \_\_\_\_\_\_ is now studying In the \_\_\_\_\_\_ class of the \_\_\_\_\_ ( duration and name of the courses). His/her conduct and character are good/satisfactory

Further the institution and the branch has been approved by AICTE/UGC vide their letter No. \_\_\_\_\_.

Seal of the Office

Date \_\_\_\_\_

No.\_\_\_\_\_

Signature of the Head of the Institution with date

## CERTIFICATE FROM HOME DEPARTMENT, GOVT. OF ASSAM

Certified that Shri/Smti \_\_\_\_\_ Son/Daughter of \_\_\_\_\_

\_\_\_\_\_ Village/District is a child of Fatal Victim of terrorism during \_\_\_\_\_

I recommend for providing him/her one time grant.

Date \_\_\_\_\_

**Signature of Competent Authority** Home Department, Govt. of Assam, Dispur, Guwahati- 6