



## TEQIP-II

NATIONAL INSTITUTE OF TECHNOLOGY SILCHAR

SILCHAR-788 010 (ASSAM)

### APPLICATION FORM FOR ASSISTANTSHIP UNDER TEQIP-II

<b>Programme: (MSc/M.Tech./Ph.D.)</b>	
<b>Category (Gen/SC/ST/OBC)</b> <i>Attach proof if belong to SC or ST</i>	

Affix Recent  
**Passport size**  
Photograph

1.	Name of the Scholar	
2.	Roll No.	
3.	Date of Birth	
4.	Date of admission (attach proof)	
5.	Nationality	
6.	Male/Female	
7.	Father's/Husband's name	
8.	Permanent address	
9.	Present address	
10.	Phone/mobile no.	
11.	Email	
12.	Department	
13.	Specialization	
14.	Whether Regular? (YES/NO) (attach proof)	
15.	Whether getting scholarship from any other source? (YES/NO) If YES then give detail	
16.	Highest Qualification	
17.	Year of passing	
18.	Percentage of marks/CPI/CGPA (Attach Proof)	
19.	Whether qualified NET/GATE? (YES/NO) If YES then year of qualification (attach proof)	
20.	Details of Savings Bank A/C with SBI at NIT Silchar Branch(Attach Proof)	Name of the Account Holder
		Account No.

## Declaration

I hereby declare that the entries made in this application form are correct to the best of my knowledge and belief. If selected for the assistantship, I promise to abide by the rules and regulations of the Institute and TEQIP-II as amended from time to time. I note that the decision of the Institute/TEQIP-II is final in regard to selection for the assistantship.

Place :

Date :

Full signature of the applicant

## Recommendation

(Only for MSc, M.Tech Students)

Recommendation by the HOD	Signature: Date:
Recommendation by the Dean (Academic)	Signature: Date:

## Recommendation

(Only for PhD Scholar)

Recommendation by the HOD	Signature: Date:
Recommendation by the Dean (RC)	Signature: Date:

## For TEQIP Office Use

Receiving detail:	Date: Signature:	
Scrutinized by:	1:	2:
Recommended by:	Date: <span style="float: right;">Coordinator, TEQIP-II</span>	
Approved by:	Director	