

## TADEPALLIGUDEM – 534102, WEST GODAVARI DIST., ANDHRA PRADESH, INDIA.

FORMAT FOR AWARD OF SCHOLARSHIP FOR Ph.D	
1. To be filled by the Student/Scholar	
Name of the Student (BLOCK LETTER)	
Roll Number	
Academic Session	
Department	
Specialization/Area of Research	
Nature of Scholarship(GATE/Other/Institute)(pl specify)	
Period of Scholarship	
Amount of Scholarship Claimed	
Bank Name and Branch	
Bank A/c No	
Declaration by the Candidate: I hereby declare that I am performing all the activities and a time. All the information given by me in this form is true and	
Date:	(Signature of the candidate)
2. To be filled by the Academic Coordinate (PG) /Guid	e.
Period of attendance Report	
Total no of working days during the period under report	
Total no of days in which Student/Scholar was present	
Number of days for which leave was sanctioned if applicable	
Date:	
	(Signature of Academic Coordinate/Guide) Full Name: Designation:
Recommendation: The amount Rs. (Rupees Only) m	ay be paid as
Scholarship (GATE/Other/Institute) for the period from	-
(2 2) tot die pottod from	
Date:	
Dute.	(Signature of HOD)

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