

**Application format for Asian Agri-History Foundation Research Fellowship**  
**ATTENTION: For Master Degree (of any discipline) Student.**

1. Name .....Id.No.....
2. College ....., Department.....
3. Date of Registration in M.Sc. 1<sup>st</sup> year.....
4. Date of Registration in M.Sc. 2<sup>nd</sup> year.....
5. Percentage of marks in M.Sc. 1<sup>st</sup> year.....
6. Percentage of marks in Undergraduate.....
7. Thesis Title .....
8. Outline of the proposed work in brief .....
9. Contact Numbers .....

Date.....

Signature of Student

1. Certified that the student is not on AP/CP at present.

Signature of Advisor

HOD, Concerned Department

Dean, PGS

**APPLICATION FORMAT FOR**  
**MERIT SCHOLARSHIP TO THE STUDENTS OF AGRICULTURAL ENGINEERING**

1. Name (IN BLOCK LETTERS) .....
2. Id.No.....
3. College .....
4. Year of Admission .....
5. Date of Registration in current semester.....
6. C.G.P.A. at the end of 2014-15.....
7. Contact No.....

Date.....

Signature of Student

Signature of Advisor

HOD

**Contingency Form**

To,  
The Dean Student Welfare  
G.B.P.U.A&T, Pantnagar

Sir,  
Kindly sanction Rs.....for purchase of books/stationary/  
chemicals from University Library/Market for my thesis work. Out of the contingency  
grant received from .....

Name of the book	App. Cost	Qty.	Amount
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

Forwarded and recommended that  
these are required for his/her course  
and research work.

(Advisor)

Yours faithfully

Name:.....  
Id.No.....  
Deptt.....  
Batch:.....  
E-mail.....  
Mobile No.....

**FORM FOR PAYMENT OF SCHOLARSHIP/FELLOWSHIP/OTHER FINANCIAL ASSISTANCE**

- 1. Name of Scholarship/Fellowship/ Financial Assistance .....
- Name of Student .....
- Id.No. ....
- Father's Name .....
- Batch/College .....
- Department .....
- Date of registration in current programme .....
- Period for which scholarship Fellowship/Financial Assistance is claimed .....

- 2. I hereby declared that:
  - a. The above assistance has been duly sanctioned to me vide no..... dated .....
  - b. I have not received any intimation regarding the withdrawal of the above sanction of assistance.
  - c. I also declare in full knowledge that misrepresentation of facts would lead to serious disciplinary and other action against me.
  - d. I am not in receipt of any other fellowship/scholarship/financial assistance.
  - e. I certified that the account No. is given below my own and correct.

Bank A/c No.....PNB/SBI/UCO.

IFSC Code.....Contact No.....

E-mail.Id.....

Signature of Student  
Id.No.....

Date .....

3. CERTIFICATE AND VERIFICATION REPORTED BY ADVISOR.

- a. I verified that Sri..... Id.No..... of .....college is/was regular in his/her attendance and his/her academic performance has been satisfactory during the period for which scholarship/fellowship assistance is claimed.
- b. The student was not on academic or conduct probation during the above mentioned period.
- c. Now the student is not on AP/CP.

Dated.....

Signature of Advisor

Name .....

Designation.....

Seal.....

DEPARTMENT.....

SL.NO..... BANK A/C NO.....(SBI/PNB/UCO)  
IFSC Code.....

**APPLICATION FORM FOR THE SANCTION OF UNIVERSITY FELLOWSHIP TO THE  
STUDENT ADMITTED TO Ph.D PROGRAMME IN.....  
SEMESTER.....**

1. Name (Block letters) : .....
2. Id.No. : .....
3. Subject of study (Major) : .....
4. Date of Registration : .....
5. Batch : .....
6. Personal Information:
  - 6.1. Father's Name : .....
  - 6.2. Present Postal Address.....
  - 6.3. Permanent Postal Address .....
7. Telephone/Mobile No. : .....
8. E-mail : .....
9. Details of Academic performance:

Sl. No.	Degree Programme	Subject	Total Marks	Marks obtained	% of marks	Remarks by HoD.
1.						
2.						
3.						
4.						
5.						

Marks obtained in University Entrance Exam of Ph.D .....

10. Are you getting any other financial assistance (if so, give full details)  
.....

**DECLARATION**

I hereby declare that I have been admitted in Ph.D degree programme on the basis of entrance examination.

I hereby declare that all the statement made in this application are true, complete and correct to the best of my knowledge and behalf, in the event of any information being found false and incorrect the award of my fellowship may be cancelled.

Total No. of Ph.D seats

Signature of the candidate

Signature of Advisor

Name in Full.....  
Id.No.....

Signature of Dean, College of  
.....

Sign. Of HoD  
.....

Sign. Dean, PGS

**APPLICATION FORM FOR RENEWAL OF UNIVERSITY PH.D FELLOWSHIP**

FOR.....SEMESTER.....20.....-20.....

1. Name of Scholar :
2. Id.No. :
3. Batch :
4. Subject (Major)/Department :
5. C.G.P.A. :
6. Date of registration  
in current semester :
7. Date of 1<sup>st</sup> registration  
(Admission time) :
8. Contact No. :
9. E-mail :

**DECLARATION OF THE APPLICANT:**

1. I hereby certify that I am not in receipt of any other fellowship/financial assistance from any other source except University fellowship.
2. That at present I am neither on AP or CP.

Signature

Name

Id.No.

Please stick off. Not applicable

**Advisor's Reports**

1. Attendance : Regular/Irregular
2. Whether the student on AP : Yes/No
3. Whether the student on CP : Yes/No
4. Overall progress of the student : Satisfactory/unsatisfactory
5. Recommendation of renewal of fellowship

Signature of Advisor\_\_\_\_\_

Name\_\_\_\_\_

Department\_\_\_\_\_

Designation\_\_\_\_\_

**Forwarded to Dean Student Welfare for necessary action.**

Signature of HOD

Name

Designation

Department

Signature

Dean

College

Seal

Signature

Dean, PGS

Seal

**APPLICATION FORMAT FOR FREESHIP IN TUTION FEE**  
**(For University Employees Ward Only)**

Academic Year.....

**A. Particulars of the Student**

1. Name in full Mr/Ms.....
2. Id.No.....Batch ..... Degree Programme.....
3. Date of registration during current academic year .....
4. Previous year's examination performance OPA/CGPA .....
5. Have you been awarded punishment of CP .....
6. Name of Father/Mother/Spouse who is University Employee.....  
..... Designation.....
7. Relationship with the university employee named at Sl 6.....
8. Details of other wards of the employee named at Sl.6 studying in the university excluding the applicant.

Sl.No.	Name	Id.No.	Batch	College

9. Contact No.....
10. Whether you have applied for in receipt of SC/ST/OBC/PH Scholarship. Yes/No.  
I hereby declare that the information as furnished above is correct.

Date.....

.....  
Signature of the Student

.....  
Signature of Father/Mother/Wife/Husband  
(Named at Sl. No. 6 above)

**B. CERTIFICATE TO BE FURINSHED BY THE SECTIONAL HEAD:**

Certified that Dr/Sri/Smt..... in the  
Department/College of ..... of this University  
in regular capacity.

.....  
Signature of the budget controlling officer with seal

**C. SPECIFIC RECOMMENDATION OF THE ADVISOR:**

The student is not on AP/CP and the application is recommended for consideration.

Date.....

.....  
Signature of the Advisor

Name .....

Department Seal.....

**D. RECOMMENDATION OF THE DEAN;**

As per records, the student is not on AP/CP. His application is recommended for  
freeship.

Dated.....

.....  
Signature of Dean,  
College Seal

**Instruction** (a) The information at Sl.No. 1 to 6 should be filled in by the student  
concerned in his own hand writing.

(b) The student should ensure in his/her own interest that all the information is  
complete & correctly filled in.

**DR.K.CSHARMA FELLOWSHIP FORM**  
**ATTENTION M.Sc. Ag, Agronomy (2<sup>nd</sup> year) Students**

1. Name (IN BLOCK LETTERS) .....
2. Id.No.....
3. College .....
4. Date of Registration in M.Sc. Ag (Agronomy) (2<sup>nd</sup> year) .....
5. G.P.A. / Percentage of Marks at the end of 1<sup>st</sup> Year .....
6. Contact No.....
7. E-mail.....

All the above information have been filled in correctly. Under-stand that if at any time any information is found cancelled false otherwise, the scholarship may be withdrawn. I am not in receipt of any scholarship. I am also recipient of .....  
Scholarship /Fellowship.

Date.....

Signature of Student

Signature of Advisor

HOD, Agronomy

Dean  
College of Agriculture



**राज्य कृषि उत्पादन मण्डी परिषद, उत्तरांचल**  
**छात्रवृत्ति के लिये आवेदन पत्र**

- अ. कृपया आवेदन पत्र संभाल कर भरें। प्रस्तुत करने के बाद किसी परिवर्तन की अनुमति न होगी। यदि यह पाया गया कि कोई प्रविष्टि गलत है तो छात्रवृत्ति को तुरन्त रद्द किया जा सकेगा।
- ब. अधुरे आवेदन पत्र पर विचार नहीं किया जायेगा।
- स. उत्तरांचल के लघु एवं सीमान्त कृषक/खेतीहार मजदूर के पुत्र/ पुत्रियाँ ही छात्रवृत्ति के लिये आवेदन कर सकते हैं।

1.	पूरा नाम	
2.	आई.डी.नम्बर	
3.	महाविद्यालय का नाम	
4.	बैच	
5.	पिता का नाम	
6.	घर का वर्तमान पता	
7.	घर का स्थाई पता	
8.	निवास स्थान के मण्डी क्षेत्र का नाम	
9.	क्या छात्र लघु एवं सीमान्त कृषक/खेतीहार मजदूर के पुत्र/पुत्री है यदि हाँ तो सम्बन्धित तहसीलदार का प्रमाण पत्र प्रस्तुत करें।	
10.	क्या पिता/अभिभावक उत्तरांचल का स्थाई निवासी है।	
11.	क्या मण्डी क्षेत्र (जिसमें छात्र निवास करता है) में नियमन लागू हुआ है। सम्बन्धित मण्डी सचिव द्वारा जारी प्रमाण पत्र संलग्न करें।	

अन्तिम संस्था/कालेज का पूर्ण विवरण:

क्र. सं.	संस्था/कालेज का नाम	प्रवेश तिथि	छोड़ने की तिथि	वर्ष

12.	अन्तिम उत्तीर्ण परीक्षा का नाम	
13.	उत्तीर्ण करने का वर्ष	
14.	परिषद/वि०वि० का नाम जिसने छात्र की परीक्षा ली	
15.	अनुक्रमांक	
16.	कुल प्राप्तांक (वैकल्पिक विषयों में प्राप्त अंकों सहित यदि वे श्रेणी	

	निर्धारण में जुड़ते हो)	
17.	परीक्षा में प्राप्त श्रेणी	
18.	कुल योग के अनुसार प्राप्तकों का प्रतिशत	
19.	परीक्षा में प्राप्त स्थान	
20.	यदि प्रार्थी को अन्य कोई छात्रवृत्ति/छात्रवृत्तियाँ राज्य सरकार/संस्था/व्यक्ति से प्राप्त हों तो उनका विवरण, मासिक दर तथा दिनांक जब से छात्रवृत्ति प्राप्त की है, विवरण दें	
21.	आवेदन पत्र के साथ भेजे जा रहे संलग्नकों की विवरण यदि गेप है तो गेप का प्रमाण पत्र संलग्न करें।	
22.	क्या अपने किसी अन्य छात्रवृत्ति हेतु आवेदन किया है यदि हाँ तो छात्रवृत्ति का नाम तथा सम्बन्धित संस्था का नाम एवं पता	
23.	दूरभाष/मोबाइल न.	

(जो न भेज रहे हों उसे कृप्या काट दें)

1. आय प्रमाण पत्र।
2. परिषद/विश्वविद्यालय की पिछली परीक्षा जिसे उत्तीर्ण किया हो, के प्राप्तकों की प्रमाणित प्रति।
3. प्रधानाचार्य/छात्र अधीक्षक का छात्रावास में रहने का प्रमाण पत्र।
4. स्नातक पाठ्यक्रम के छात्र/छात्राओं द्वारा विश्वविद्यालय में चयन की मैरिट प्रमाण पत्र तथा स्नातकोत्तर पाठ्यक्रम में स्नातक स्तर के प्राप्तांक या ओ.जी.पी.ए.।
5. अन्य कोई प्रमाण पत्र।

प्रमाणित किया जाता है कि आवेदन पत्र में अंकित विवरण सही है। मैं घोषणा करता/करती हूँ। कि यदि मेरा चयन इस छात्रवृत्ति हेतु होता है मैं अपना पूरा समय अध्ययन में लगाऊंगा/लगाऊंगी और अन्य किसी श्रोत से कोई छात्रवृत्ति नहीं लूंगा/लूंगी। मैंने कोई सूचना न तो छिपायी है या छिपायी है। मैंने छात्रवृत्ति स सम्बन्धित सभी नियम व शर्तें पढ/समझ ली है।

स्थान:

आवेदनकर्ता के हस्ताक्षर

दिनांक:

### अधिष्ठाता की आख्या

श्री/श्रीमती/कु0/..... आई.डी.न.....  
 ..... जो श्री ..... के पुत्र/पुत्री है के बारे में  
 प्रमाणित किया जाता है कि उन्हें संस्था के ..... पाठ्यक्रम में जो .....  
 ..... वर्ष का है, भर्ती किया गया है। वह छात्रावास में नहीं रहता/रहती है।

संस्तुति

अधिष्ठाता

सलाहकार

संस्था की मोहर

## 1. भूमि

अ. स्वतंत्र रूप से स्वामी की हैसियत से (यदि पूरी भूमि या उसका अंश पट्टेदारी/साझेदारी में उठा दी गई है तो इसके विवरण दें)

क. क्षेत्रफल

ख. गांव

ग. सर्वे संख्या

घ. भूमि का लगान

ब. संयुक्त रूप से स्वामी की हैसियत से

क. क्षेत्रफल

ख. गांव

ग. सर्वे संख्या

घ. भूमि का लगान

स. स्वतंत्र रूप से पट्टेदार/साझेदार की हैसियत से

क. क्षेत्रफल

ख. गांव

ग. सर्वे संख्या

घ. भूमि का लगान

2. अन्य सम्पत्ति एवं उनकी आय (मकान/दुकानें आदि)

क. मकान स0

ख. गली/सडक

ग. गांव/कस्बा/शहर

घ. क्षेत्रफल

छात्र के पिता/माता के हस्ताक्षर

**RENEWAL FORM OF MANDI SAMITI SCHOLARSHIP**

**For the year.....**

- 1. Name of student .....
- 2. Id.No. ....
- 3. Class & Batch .....
- 4. Progress report for the year .....
- 5. Class of study .....
- 6. Conduct of the scholar .....
- 7. Any scholarship/fellowship /financial assistance is receipt or not From any other sources .....
- 8. I am not on AP/CP .....

Signature of Student

Sri.....Class..... year

is recommended for renewal of Mandi Samiti Scholarship. Student is not on AP/CP.

Signature of Advisor  
Name of Advisor .....  
College.....  
Seal

Dean,  
College of Ag/PGS  
Seal

**OFFICE OF THE DEAN STUDENT WELFARE**  
**G.B.PANT UNIVERSITY OF AGRICULTURE & TECHNOLOGY, PANTNAGAR**  
**DISTT-UDHAM SINGH NAGAR (UTTARAKHAND)**

**PAYEES STAMPED RECEIPT**

Received through Bank Name & A/c No..... dated .....

For Rs. .... (in words..... from the Dean Student Welfare, G.B.Pant University of Agriculture & Technology, Pantnagar, Distt-U.S.Nagar on account of my..... Scholarship/Fellowship, Contingency for the period of ..... to ..... sanctioned by the .....

Name....., Id.No.....  
Room No....., Hostel Name.....  
College .....Mobile.....  
E-mail id.....

Rs. 1 Revenue Stamp paste
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Countersigned

Dean Student Welfare  
G.B.Pant University of Agriculture & Technology,  
Pantnagar, Distt-U.S.Nagar

**P.P.I.C. SCHOLARSHIP FORM**  
**ATTENTION M.Sc. Students in Soil Science/Agronomy**

1. Name .....Id.No.....
2. College .....
3. Date of Entrance Examination.....
4. Date of Registration in M.Sc. 1<sup>st</sup> year.....
5. No & percentage of marks in High School.....
6. No & percentage of marks in Intermediate.....
7. No & percentage of marks in B.Sc.....
8. No & percentage of University Entrance Examination.....
9. Research on Potassium in Soils. Crops of UP/Uttarakhand.....  
Yes/No.....Grand Total .....
10. Contact No.....

Date.....

Signature of Student

1. Certified that the student is not on AP/CP at present.
2. Certified that the student will work for his/her master/thesis on aspect of Potassium in Soil/Crop of UP/Uttarakhand.

Signature of Advisor

HOD, Soil Science

Dean, PGS

**PRIYANK PATHAK SCHOLARSHIP FORMAT**

**ATTENTION B.Sc. Ag (IV year) Students**

1. Name (IN BLOCK LETTERS) .....
2. Id.No.....
3. College .....
4. Date of Registration in B.Sc. Ag (IV year) .....
5. C.G.P.A. / Percentage of Marks at the end of 3<sup>rd</sup> Year .....
6. Percentage of marks secured at 10+2 level .....
7. Percentage of marks secured at 10<sup>th</sup> standard .....
8. Communication skills as evidenced by debating/elocution competitions  
.....
9. Sports at college/University/State level .....
10. Cultural activities.....
11. Contact No.....

All the above information have been filled in correctly. Under-stand that if at any time any information is found cancelled false otherwise, the scholarship may be withdrawn. I am not in receipt of any scholarship. I am also recipient of.....  
Scholarship /Fellowship.

**Date.....**

**Signature of Student**

**Signature of Advisor**

**Dean, College of Agriculture**

**S.N.Nayar Memorial Scholarship Form**

(To be filled by S.N.Nayar Memorial office Only)

Application No.....

Financial Year  
(month/year)

Date.....

**A. PERSONAL DETAILS.**

1. First Name.....
2. Middle Name.....
3. Last Name.....
4. Nationality .....
5. Date of Birth .....
6. Sex                      Male                      Female
7. Disability (if any please mention in details).....
8. Father's Name.....
9. Occupation.....
10. Mother's Name .....
11. Occupation .....
12. Total Income (income of the family).....
13. Address for correspondence .....
- (apart from Institute address)
14. Telephone No.....
15. Email.Id.....
16. Whether you have applied for in receipt of any other scholarship.                      Yes/No.

**B. ACADEMIC DETAILS.**

1. Course Name.....
2. Duration of Course (no of years).....
3. Rank in Common Admission Test (CAT).....
4. Annual estimate of found required for the course per year (in Rs.).....
  - i). Tution Fee.....
  - ii). Books.....
  - iii). Hostel Fees.....
  - iv). Any other .....



**C. EDUCATIONAL QUALIFICATION (please give the details for Matriculation and onwards).**

Name of Examination	Year	Board/University/ Institution	Division/Class/ Grade	% obtained

**Graduation and above; (if results of final year are not received, mention upto latest result)**

Degree	Year	Subject	Institute/University	Class/Grade	% obtained

**D. QUALIFICATION ACHIEVEMENT (Scholars can use the separate sheets if space is not sufficient)  
(to be filled in own handwriting only).**

1. Please mention any academic distinction, grants, scholarship and prizes received by you.

2. Please share your achievements so far if any field (not exceeding 200 words).

3. Attach a personal statement (not exceeding 200 words) sharing your dreams, achievements, aspirations and life-goal.

The candidate is required to give two references of reputed persons other than his/her relatives. The Memorial will be at liberty to refer to them regarding the candidate's background for the scholarship.

Full Name.....  
Occupation.....  
Full address.....  
And contact No.....  
.....  
.....

Relationship with  
Candidate.....

I, hereby declare that the above information furnished by me is true and correct in all respect.

Signature of the Applicant.....

Full Name.....  
Place & date.....

**Authorization by Head of the Institute**

I solemnly declare that the scholarship committee of the Institute has taken due diligence and the above information (especially point no A.7, A.12, B.3 and C) furnished by the applicant is true and correct in all respect to the best of my knowledge. I, therefore, recommend his/her candidate for the S.N.Nayar Memorial Scholarship scheme.

Signature.....  
Name.....  
Designation.....  
Date.....

Seal of the Institute

**General terms and conditions.**

1. It is essential that the candidate fills in all the information in the applicant form correctly and truthfully. If it is found that students had made false statement in the application form, the memorial will have full discretion to stop the scholarship.
2. On receipt of the intimation of grant of scholarship the candidate is to inform his/her bank details to S.N.Nayar Memorial to enable easy remittance of scholarship amount.
3. A confirmation latter from the scholar on receiving the cheque should be sent to S.N.Nayar Memorial within 10 days, as a receipt of the cheque.
4. A change of stream after allotment of the scholarship will lead to disqualification from the scheme.
5. A scholars who has dropped a semester shall be disqualified as a scholar, except when G.B.Pant University has cancelled the semester due to any reason. However, a scholar who has dropped the semester on medical ground shall be eligible for the scholarship.
6. For renewal of scholarship, the S.N.Nayar Memorial scholar will send a request letter within 15 days after the announcement of result, giving details of his/her academic achievement in the last academic year and letter of recommendation from the head of the institute (as per format), and it will be renewed based on the renewal criteria.