

APPLICATION FORM FOR ASSISTANTSHIP RENEWAL UNDER TEQIP-II



TEQIP-II NATIONAL INSTITUTE OF TECHNOLOGY SILCHAR SILCHAR-788 010 (ASSAM)

Programme: (M.Tech/ MSc)	
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1.	Name of the Student	
2.	Registration No.	
3.	Current Semester.	
4.	Date of Registration in Current Semester (Attach xerox copy of Registration proof)	
5.	SPI (1 st Sem)/ CPI (2 nd Sem)/ CPI(3 rd Sem) (Attach xerox of grade sheet)	
6.	Category:(Gen/SC/ST/OBC) (Attach proof if belong to SC or ST)	
7.	Have you ever FAIL in any subject? If YES give details.	
8.	Whether your Current Semester Registration as Regular or Part Time Student?	
9.	Have you performed the duties assigned to you as per Assistantship norms.	
10.	Have you availed total leave more than 30 days in an academic year? If YES give detail with proper reason.	
11.	Is any disciplinary action taken by the Institute Authority against you? If YES give detail.	

Declaration

I hereby declare that the entries made in this application form are correct to the best of my knowledge and belief. 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 for renewal of the assistantship.

Place :

Date :

Full signature of the applicant

Recommendation

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

For TEQIP Office Use

Scrutinized by:	1:	2:
Recommended by:	Date: Coordinator, TEQIP-II	
Approved by:	Director	