



THE UNIVERSITY OF BURDWAN

OFFICE OF THE SECRETARY
FACULTY COUNCIL OF ARTS ETC.

Swami Vivekananda Merit-Cum-Means Scholarship Registration Form

No.	Course / Programme Name (✓Please)	:	M.Phil.		Ph.D.			
1.	Name of the Affiliating University	:	The University of Burdwan					
2.	Claim Period	:						
3.	Date of Admission	:						
4.	Termination Date (If Any)	:						
5.	Last Amount Received	:						
6.	Period of Last Amount Received	:						
7.	Name of the Applicant (In Capital Letters)	:						
8.	Registration No.	:						
9.	Date of Registration	:						
10.	Discipline (✓Please)	:	ARTS		SCIENCE		COM.	
11.	Department / Subject	:						
12.	Mobile No.	:	(+91)					
13.	Name of the Supervisor	:						
14.	Full Signature of the Applicant	:						
15.	Date	:						
16.	Registration No. & date of Registration (for Office Use only)	:	WB					

N.B.: Write NA whichever is not applicable