JOINING CUM VERIFICATION CERTIFICATE FOR **RENEWAL** APPLICATION ON NSP

S.No	PARTICULARS	**INFORMATION** (To be filled by institution in CAPITAL letters)
1	Name of Institution	
2	Whether recognised/included under Section 2 (f) or Section 3 of UGC Act or a Government institution	(To be mentioned here clearly)
3	AISHE code of Institution	
4	NAAC score/rating (valid at the time of signing this Certificate)	
5	In case of affiliated institution, name of the affiliating University	
6	Postal Address of Institution	
7	Email ID of institution	
8	Name of Nodal Officer of institution, who is authorised to verify applications on NSP	
9	Mobile Number of Nodal Officer	

10. It is certified that Mr./Ms._____ son/daughter of Mr._____ National Scholarship Portal (NSP) application ID_____ is a full time, regular and bonafide student of our institution and is studying in_____ **YEAR** of _____(name of degree). The duration of course is _____ years. The nomenclature and duration of course is as per UGC Notification on Specification of Degrees, 2014 and its amendments (available at https://www.ugc.ac.in/)

11. The candidate has applied for scholarship under the scheme _____. We have read the guidelines and eligibility conditions for the same at https://scholarships.gov.in/. It is certified that the candidate is eligible for scholarship as per the eligibility conditions stipulated in the guidelines. We have seen, checked and verified all the documents submitted by candidate to confirm his/her eligibility for scholarship and all these documents are kept in the safe custody of the Institution.

12. We understand that NSP/UGC will disburse the amount of scholarship directly into the account of candidate on the basis of information given by candidate and certified/verified by our Institution. The Institution is fully responsible for the correctness of information as given in the online application and eligibility of candidate.

13. It is certified that the student is not in receipt of any other scholarship/monetary benefit from any other source other than the scheme for which the student is applying.

Signature of Nodal Officer of Institution: Date: Seal:	Signature of Head of Institution: Date: Seal:
Name:	Name:
Designation:	Designation:

Note: *To be signed by Head of the Institution i.e. Registrar/Principal/Director. Complete information is required to be filled. Applications with Incomplete information will not be accepted.*