OFFICE THE PRINCIPAL

SRIKISHAN SARDA COLLEGE

(Affiliated to Assam University & A grade reaccredited by NAAC)
ESTD – 1950
P.O. HAILAKANDI, DIST. – HAILAKANDI, PIN – 788151 (ASSAM)
Email – sscollege@sscollegehkd.ac.in Fax No. (03844) 222409.

No. Date: 18-12-2024

NOTICE

This is for the information of all the eligible beneficiaries of Dr. Banikanta Kakati Award, 2024 under Consignee Principal, S.S. College, Hailakandi that the distribution of Appreciation Certificate will be started very soon.

So, all the eligible beneficiaries are asked to keep ready the following documents to be produced / submitted on the date of final verification for distribution of Appreciation Certificate, otherwise certificates will not be given and the candidates shall be considered as disqualified for Dr. Banikanta Kakati Award, 2024 as per guideline.

1. List of Original Documents to be Produces.
   (a) HS Admit Card, Registration Card, Marksheet & Certificate
   (b) Aadhaar Card (Birth Certificate / HSLC Admit Card if Aadhaar card is not available)
2. List of Original / Photocopy of Document to be submitted.
   (a) Filled in Proforma
   (b) Copy of HS Admit Card, Registration Card, Marksheet & Certificate
   (c) Copy of University Registration Certificate
   (d) Copy of Admission fee receipt
   (e) Bonafide Reding Certificate issued by the Head of the Institution where the beneficiary is presently studying.

The beneficiaries should remain present on the specified dates and receive the certificate personally with receiving signature. However, in case of genuine Academic / Medical reason, the beneficiary may authorize his / her parent to receive the certificate for and on behalf of the beneficiary. In such cases, the authorized parent must produce all the required documents along with his / her Aadhaar Card.

(Hilal Uddin Laskar)
Principal i/c
S.S. College, Hailakandi

Principal-in-charge
S.S. College, Hailakandi

DR. BANIKANTA KAKATI AWARD – 2024
S S COLLEGE, HAILAKANDI (CONSIGNEE PRINCIPAL)
FORM TO BE FILLED BY ELIGIBLE BENEFICIARY

Beneficiary Gender :- Male / Female **Beneficiary Sl. No.**_____

1. Name of the Beneficiary (In Capital) :-
2. Fathers Name (In Capital :-
3. Mothers Name (In Capital) :-
4. Phone No. / WhatsApp No. :-
5. Name of the Institution from which HS Examination Passed :-
6. HS Registration No. & Year :-
7. Total Marks Obtained :-
8. Course Presently Studding :-
9. Name of the College / University Presently Studding (with Address) :-
10. Samarth / University Enrollment No. :-
11. University Registration No. :-
12. Name of the Authorized Person if any :-
13. Relationship with the Authorized Person :-

Date:- Full Signature of the Beneficiary

FOR OFFICE USE ONLY

Accepted / Rejected After Verification
(Reason of Rejection if rejected)

Signature of the Verifying officer with date Signature of Consignee Principal