



राष्ट्रीय प्रौद्योगिकी संस्थान मेघालय  
NATIONAL INSTITUTE OF TECHNOLOGY MEGHALAYA  
(An Institute of National Importance, under Ministry of Education, Govt. of India)

Bijni Complex, Laitumkhrah, Shillong – 793003 (India)  
Website: www.nitm.ac.in

Ref. No: NITMGH/SW/Student Notice/2024-25/25

Dated: 28/05/2025

**NOTIFICATION**

**McM Scholarship 2025 for 4<sup>th</sup> Semester M. Sc**

This is to notify to the 4<sup>th</sup> semester students of NIT Meghalaya, who are not availing any financial assistance from other source, that applications are invited for Merit-Cum-Means scholarship after Autumn 2024 then you may apply for the same latest by 11<sup>th</sup> June 2025.

Eligibility Criteria:

1. Students should have consistent **CGPA of 8.5 or higher** in the first three semesters.
2. Attendance percentage in the class should be **minimum 90%**.
3. Family Income from all sources must **not exceed 5 lakhs per annum**. The Annual Income Certificate (from all sources) of the family issued preferably by a designation not below Tehsildar or any other equivalent Revenue Officer must be furnished.
4. The scholarship amount is RS 7,500/- per semester.
5. Eligible students should not have any non-disciplinary records.
6. Eligible Students may apply through the application form uploaded in the website under Student's Corner-Scholarships and submit the hard copy along with all the required documents to the Admission and Fee counter latest by the **11<sup>th</sup> June 2025** after which applications or documents will not be accepted.

This is issued with the approval of the Competent Authority.

  
Dean (SW)

E-Copy to:

- 1) Director's office, for kind information of the Director
- 2) All HoDs, for Information
- 3) Members of the Section Committee, for information and needful.
- 4) Nodal Officer cum Chairperson, for kind information.
- 5) E-notice
- 6) Concerned File



# NATIONAL INSTITUTE OF TECHNOLOGY MEGHALAYA

## राष्ट्रीय प्रौद्योगिकी संस्थान मेघालय

### Merit-Cum-Means Scholarship Form Session 20\_\_\_\_\_

Roll No:  Discipline:

Programme (M.Sc):

CGPA (latest):

#### Personal Details

1. Name:

2. Nationality:

3. Category: GEN  OBC  PH

4. Gender:  Male  Female

5. Date of Birth:  Year  Month  Date

6. Father's Name:

7. Mother's Name:

8. Mailing Address of Parents:

|                      |                   |
|----------------------|-------------------|
| <input type="text"/> |                   |
| <input type="text"/> |                   |
| <input type="text"/> |                   |
| City:                | State:            |
| Pin Code:            | Ph.No. of Parents |

9. Bank Account Details:

|                          |            |
|--------------------------|------------|
| Bank Name & Branch:      |            |
| Account Holder's Name:   |            |
| Account No:              |            |
| Savings/Current Account: | IFSC Code: |

**10. E-Mail I.D & Ph. No.:**

**11. Alternate E-Mail I.d:**

**12. Declaration by the Student:**

- (i) I hereby declare that the information given above is correct.
- (ii) I am availing/ not availing any other scholarship from any other source.
- (iii) **If Yes**, details of the source from where scholarship is availed and since when \_\_\_\_\_  
\_\_\_\_\_
- (iv) I shall abide by the terms and conditions of the merit scholarship.
- (v) I undertake that if at any stage, it is found by the sanctioning authority that the information given by me is false or if I violate the terms and conditions of the scholarship, the scholarship sanctioned to me may be cancelled and necessary amount, if any, will be refunded back to the Institute.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place: \_\_\_\_\_

*Signature of the Candidate*

**13. Family's Annual Income:**

- i) Father's Gross Annual Income:
- ii) Mother's Gross Annual Income (if any):
- iii) Annual Income from other source, (if any):

**14. Father's/Guardian's Name & Occupation:** \_\_\_\_\_  
\_\_\_\_\_

**15. Mother's Name & Occupation:** \_\_\_\_\_  
\_\_\_\_\_

**16. For Office Use: (to be filled by departmental Office)**

A. Attendance % in the last Semester:

B. Disciplinary Conduct: (remarks in the form by disciplinary committee)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Verified by**

**Chairman, Disciplinary Committee**

**17. Verification or information to be furnished by the Head of  
Institute/Authority**

It is certified that the information filled in the above mentioned columns by Mr/Ms . . .  
..... S/o, D/o Mr. ....  
. who is admitted in ..... Programme for the academic year  
..... in ..... Institute is correct.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place: \_\_\_\_\_

**Signature of the Head of  
Department/First Year Co-  
ordinator**

**Recommended:**

**Approved:**

**Chairman, Selection Committee**

**Director, NITM**

**LIST OF DOCUMENTS TO BE SUBMITTED**

**Following documents have to be submitted for verification**

**1) For the Salaried Class (Parents/Guardians who are in Service either in the Govt. Or Private Sector):**

- a) Latest Salary Certificate in prescribed Form 'A' given in **Annexure II** duly sealed/stamped by the Salary Disbursing Officer along with a copy of latest salary slip.
- b) Latest Copy of ITR Processed form for the Assessment Year 2024-25.

**Note:** SUBMISSION OF **THESE DOCUMENTS ARE MANDATORY** Please note that Low income group of salaried class people, who need not submit Latest copy of ITR Processed form, they have to submit an attested copy of Income Certificate from Local District Authorities like S.D.O./B.D.O./M.R.O./TAHSILDAR/Chairman/Executive Officer of Municipal Corporation etc. instead of Latest Copy of ITR Processed form.

**2) For Non-Salaried Class (Guardians who are not in Service such as Businessman, Agriculture/Legal or Medical Practitioners, Consultants, Private Tutors, Retired without Pension/Agent/Self-employed persons, etc)**

- a) An **Annual Income Affidavit** for the financial year 2024-25 in a Non-Judicial Stamp for Rs.20/- sworn in before preferably a First Class Magistrate / Notary Public as per the format given in **Form "B" Annexure III**.
- b) Attested Copy of Income Certificate from local District Authorities like S.D.O./B.D.O./M.R.O./TAHSILDAR/Chairman/Executive Officer of Municipal Corporation, etc in addition to Income Affidavit and other documents as stated above and below.

**Note:** SUBMISSION OF **THESE TWO DOCUMENTS as stated in 2 (a & b) above, ARE MANDATORY** FOR ANY CLASS OF OCCUPATION IN CASE OF NON-SALARIED GUARDIANS.(such as Agriculture, Business class, self-employed, Legal/Medical Practitioners/Retired without Pension/Private Tutors/Contractors/Consultants etc.)

- c) Latest Copy of ITR Processed form for the Assessment Year 2024-25  
Copy of Registration Certificate must be submitted in case of Medical Practitioner and Legal Practitioner. Those who retired without pension has to submit Retirement/Termination/Superannuating letter/documents/papers, etc, in addition to Income Affidavit, Income and non employment Certificate from Local District Authorities like SDO/BDO/MRO/ TAHSILDAR, Local Municipal Corporation, etc and also Income Tax Documents, if applicable, as stated in item 2) a & b above.

**3) For Pensioners/Family Pensioners:**

- a) Latest Annual Pension Payment Certificate in prescribed Form 'C' given in Annexure IV to be issued by the Pension Disbursing Officer along with a copy of latest pension received. Pass book photocopy or Pension Slip issued by State Bank of India showing latest Pension received details.
- b) An Income Certificate from Local District Authorities like S.D.O. / B.D.O. /M.R.O./ TAHSILDAR, Chairman/ Executive Officer of Municipal Corporation etc. for the year 2024-25 also to be submitted or else a NON-Employment Certificate.

**N.B.: SUBMISSION THESE TWO DOCUMENTS as stated in 3 (a & b) above, ARE MANDATORYFOR THE GUARDIANS WHO ARE EITHER PENSIONER OR FAMILY PENSIONER.**

- c) Copy of PPO, Superannuating/Retirement/Termination letter and Latest Copy of ITR Processed form for the Assessment Year 2024-25.

**FORM – A****ANNUAL INCOME CERTIFICATE FOR THOSE PARENTS/GUARDIANS WHO ARE IN  
SERVICE  
(Govt or Pvt.)****PART – I :Income from Salary**

1. Name and Address of the Employer :
2. Certified that \_\_\_\_\_ is employed in this Organisation \_\_\_\_\_ (Name of the organisation), in the Post of \_\_\_\_\_, (Designation held by the employee) and that the break-up of his Gross Annual Income from Salary received in the Financial Year \_\_\_\_\_ is as follows :

| Item         |  | Total Amount for 12 months |
|--------------|--|----------------------------|
| i)           | Basic Pay  |                            |
| ii)          | D/Pay  |                            |
| iii)         | DA/ADA/Relief  |                            |
| iv)          | H. R.A.  |                            |
| iv)          | Special Pay & Honorarium, Bonus, Arrears, etc. ,if any |                            |
| v)           | Other Allowances, if any                               |                            |
| Gross Income |  |                            |
| Net Income   |  |                            |

**Name :****Signature:****Designation:****Contact No& Mail ID:****Date :**

(Official Seal)

**N.B. 1):** All the entries as stated above must be supported by Latest Copy of ITR Processed form for the Assessment Year 2024-25 if applicable.

2) Guardians whose annual gross income is low and need not submit Latest Copy of ITR Processed form, **have to submit (i)**A certificate from Employer/Salary disbursing officer stating that their annual income is Not Taxable and they need not produce Latest Copy of ITR Processed form and **(ii)** Attested copies of an Annual Income Certificate for 2024-25 from District Authority like S.D.O./B.D.O./TAHSILDAR, Anchal Officer, Executive Officer of Municipal Corporation/ Gram Panchayat etc.

Contd. .



**FORM – B**

**(FOR USE BY THOSE GUARDIANS WHO ARE NOT IN EMPLOYMENT ANYWHERE AND DOES NOT DERIVE INCOME FROM SALARY/PENSION)**

I, Shri/Smt. \_\_\_\_\_ a resident of \_\_\_\_\_

solemnly declare that :

2. My son/daughter Mr/Miss \_\_\_\_\_ is currently studying at the National Institute of Technology, Meghalaya, in 2-year M.Sc Programme, in the Branch of \_\_\_\_\_

3. I declare that my spouse is employed/not employed and that the Annual Income of my family in the Financial Year \_\_\_\_\_ i.e. during the period from 1<sup>st</sup> April, \_\_\_\_\_ to 31<sup>st</sup> March, \_\_\_\_\_ was as mentioned hereunder

**(Supported by document) :**

**(A) From my own profession as indicated:**

- i) Income from Business/Medical practice/Legal Practice/Engineering /Consultancy etc. Rs. \_\_\_\_\_ p.a  
.
- ii) Income from Agriculture Rs. \_\_\_\_\_ p.a  
.
- iii) Income from Landed Properties Rs. \_\_\_\_\_ p.a  
.
- iv) Income from Investment in Bank/Post Office Rs. \_\_\_\_\_ p.a  
.
- v) Income from Share Certificates/Debentures Rs. \_\_\_\_\_ p.a  
.
- vi) Income from any other sources(i.e. Retirement Benefits for VRS/VSS etc., if any) Rs. \_\_\_\_\_ p.a  
.

**(B) Income of my wife/husband (if any)**

- ( if employed, Salary certificate from Employer to be enclosed) Rs. \_\_\_\_\_ p.a  
.
- (C) Income in the name of my son/ward (if any)** Rs. \_\_\_\_\_ p.a  
.

**GROSS TOTAL INCOME (A+B+C) :**

*Further, I declare that the information given above is true. I shall also be personally held responsible in the event of any information or documents provided by me are found to be incorrect/false.*

**Date :** \_\_\_\_\_  
**Signature of the Father /Guardian :** \_\_\_\_\_  
**Full Name :** \_\_\_\_\_  
**Address with Pin Code :** \_\_\_\_\_  
**Phone No. & e-mail ID** \_\_\_\_\_

**FORM – C**

**(FOR PENSIONER/FAMILY PENSIONER ONLY)**

(INCOME /SALARY CERTIFICATE FOR THOSE GUARDIANS WHO ARE IN PENSION  
(RETIRED FROM SERVICE OR THEIR WIVES ARE GETTING FAMILY PENSION

**PART – I : Income from Pension /Family Pension :**

1. Name and address of the Ex-Employer :  
with P.P.O. No.

2. Certified that \_\_\_\_\_ was employed in  
this Organisation/superannuated from in the capacity of  
\_\_\_\_\_ (post held by the retired employee) and that the

break-up of his/her Annual Income from Pension /Family Pension received in the financial  
year \_\_\_\_\_ is as follows :

| <u>ITEM</u>                                 | <u>TOTAL AMOUNT FOR 12 MONTHS</u> |
|---|-----------------------------------|
| i) Basic Pension/F. Pension :               |                                   |
| ii) Dearness Relief :                       |                                   |
| iii) Other Allowances,<br>Arrears, if any : |                                   |
| <b>Total</b> :                              |                                   |

**Signature of Ex-Employer/Pension  
Disbursing Authority :** \_\_\_\_\_

**Designation :** \_\_\_\_\_

**Date :**

**(Official Stamp)**

