

ફેક્સ : (૦૭૯) ૨૬૩૦૨૬૫૪  
ટેલિફોન : ૨૬૩૦૧૩૪૧-૨૬૩૦૦૩૪૨-૪૩  
૨૬૩૦૦૧૨૬



Fax : (079) 26302654  
Telephone : 26301341-26300342-43  
26300126

ગુજરાત યુનિવર્સિટી કાર્યાલય,  
પોસ્ટ બોક્સ નં ૪૦૧૦,  
નાવરંગપુરા, અમદાવાદ - ૩૮૦ ૦૦૯

ગુજરાત યુનિવર્સિટી  
GUJARAT UNIVERSITY  
www.gujaratuniversity.org.in

Office of the Gujarat University,  
Post Box No 4010,  
Navarangpura, Ahmedabad - 380 009

નં.સ્કોલરશીપસેલ/૧૬૭૭/૨૦૨૪

તા.૦૪-૦૯-૨૦૨૪

૦૬-૧૦-૨૦૨૪

પ્રતિ,

૧. યુનિવર્સિટીના ભવનોના ડાયરેક્ટરશ્રીઓ...
૨. યુનિવર્સિટીના વિભાગોના વડાશ્રીઓ...

વિષય : નેશનલ સ્કોલરશીપ ૨૦૨૪-૨૫ અંતર્ગત Joining Cum Verification Certificate For  
Fresh Application માટે...

સંદર્ભ : National Scholarship For Postgraduate Studies

માનનીય સાહેબશ્રી,

ઉપરોક્ત વિષય અને સંદર્ભ પરત્વે આ સાથે સામેલ Joining Cum Verification  
Certificate For પી.જી. સ્ટુડન્ટની હાજરીની વિગતો તેમજ સ્ટુડન્ટ રેગ્યુલર હોય તેની સંપૂર્ણ  
જવાબદારી અધ્યક્ષ તેમજ વડા દ્વારા પ્રમાણિત કરવામાં આવે તેમજ વિભાગ/ભાવનોની  
જવાબદારીમાં રહેશે. નોડલ ઓફિસર દ્વારા તેવી અરજીઓ દરખાસ્તની વેરીફિકેશન કરવામાં  
આવશે.જેની નોંધ લેવા વિનંતી.

આભાર,

નોડલ ઓફિસર  
સ્કોલરશીપ સેલ

બીડાણ : ઉપર મુજબ

**University Grants Commission, New Delhi-110 002**  
**JOINING CUM VERIFICATION CERTIFICATE FOR FRESH APPLICATION ON NSP**

**NATIONAL SCHOLARSHIP FOR POSTGRADUATE STUDIES**

S.No	PARTICULARS	INFORMATION (To be filled by institution in CAPITAL letters)
1	Name of Institution	GUJARAT UNIVERSITY, AHMEDABAD SCT CELL PSYCHOLOGY Dept., Gujarat University, Navrangpura, AHMEDABAD GUJARAT
2	Whether recognised/included under Section 2 (f) or Section 3 of UGC Act or a Government institution	(To be mentioned here clearly)
3	ABHE code of Institution	U 0138
4	NAAC score/rating (valid at the time of signing this Certificate)	
5	In case of Affiliated institution, name of the affliating University	
6	Postal Address of Institution	SCT CELL PSYCHOLOGY Dept., Gujarat University, Navrangpura, AHMEDABAD GUJARAT
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 IL \_\_\_\_\_ is a full time, regular and bonafide student of our institution and is studying in **FIRST YEAR of MASTER OF ARTS (PSYCHOLOGY)**. 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 \_\_\_\_\_)

11. We have read the guidelines and eligibility conditions for the same at <https://scholarship.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 category under which he/she has applied. All these documents are being 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 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	Signature of Head of Institution
Date:	Date:
Seal:	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 for 2nd level verification.*

**University Grants Commission, New Delhi-110 002**