

डॉ० शकुन्तला मिश्रा राष्ट्रीय पुनर्वास विश्वविद्यालय, लखनऊ Dr. Shakuntala Misra National Rehabilitation University, Lucknow उत्तर प्रदेश सरकार



पत्रांकः- 6 9 / डी०एस०डब्ल्यू० / डॉ.श.मि.रा.पु.वि.वि. / 2024-25,

दिनांक:- 06 अवस्वर, 2025

सेवा में.

समस्त अधिष्ठाता / विभागाध्यक्ष / निदेशक / समन्वयक (ललित कला एवं संगीत लंकाय को छोड़कर) डॉ० शकुन्तला मिश्रा राष्ट्रीय पुनर्वास विश्वविद्यालय,

महोदय.

कृपया पत्र के साथ संलग्न All India Confederation of the Blind के पत्र पत्रांक संo AICB/K-1/2025 का संदर्भ ग्रहण करने का कष्ट करें, जिसके माध्यम से Krishna Kumari Varma Memorial Award 2025 for Master's Degree 1st/2nd position holder blind students जिन्होंने शैक्षणिक वर्ष 2024-25 में स्नातकोत्तर परीक्षाओं (ललित कला एवं संगीत विभाग को छोड़कर) में प्रथम या द्वितीय स्थान प्राप्त किया हो, उनको Krishna Kumari Varma Memorial Award 2025 हेतु आवेदन किये जाने हेतु प्रोफार्मा प्रेषित किया गया है। आवेदन करने की अंतिम तिथि 20 नवम्बर, 2025 निर्धोरित है।

उक्त के कम में पन्न के साथ Krishna Kumari Varma Memorial Award 2025 for Master's Degree $1^{st}/2^{nd}$ position holder blind students का प्रोफार्मा संलग्न है। कृपया अपने विभाग के सम्बन्धित विद्यार्थियों को उपरोक्त सूचना प्रेषित करने हेतु अग्रेतर कार्यवाही करने का कष्ट करें।

संलग्नक-उपरोक्त वर्णित पत्र एंव आवेदन प्रोफार्मा की छायाप्रति।

(डॉ० आशुतोष पाण्डेय) अधिष्ठाता. छात्र-कल्याण

पृष्ठांकन सं0 व दिनांक उपग्लेक्तानुसार। प्रतिलिपि:-निम्नलिखित को शाद्र सूचनार्थ प्रेषित।

1. वैयक्तिक सहायक कृलपिति, को भा० कुलपित महोदय के सादर अवलोकनार्थ।

अधिष्ठाता शैक्षणिक।

3. कुलसचिव, विश्वविद्यालय।

सिंस्टम एनालिस्ट हो विश्वविद्यालय की बेबसाइट पर अपलोड किये जाने हेतु।

5. गार्ड फाइल।

(डॉ० आशुतोष पाण्डेय) अधिष्ताता, छात्र-कल्याण



All India Confederation of the Blind

Miner Line Recipients of National Award from GOI) Affiliated to WORLD BLIND UNION

Admin. Off. : Braille Bhewan (Behind Rajly Gandhi Cancer Hospital). Sector-5, Rohini, Delhi - 110085 (INDIA) Regd. Off. : Babukhan Estate, Basheerbagh, Hyderabad

Phone Nos : 011-27054082, 27050915

Website www.aicb.org.in

E-meil : sichderni@yahoo.com abudefhi@rediffmail.com



President

Prof. Anii K. Aneja

Vice Presidents Mrs. M. Muthu Selvi

Mr. P. Chokka Rao 🛂 r. S. K. Singh

उप कुलसचिव कार्यालय सन्दर्भ सं० - 1887 दिनांकः २५-10-021 (By Registered/Speed Post)

Ref: AICB/K-1/2025

The Registrar/Vice Chancellor

Dr. Shakuntala Misma rattoral

Rehablitation Umivarity

Lycknow, WHEAR products

Secretary General Mr. J.L. Kaul Recipient of

Padma Shri Award 2014

Sir/Madam,

Secretaries Mrs. Manjula Rath Mr. Tarkeshwar Lynn

Treasurer Mr. Satish Chand Shalma

Chair: Women Matters Ms. Banita Padhi

Donatione Exempted from Income Tax Under Section 80 G of 1.T. Act 1981

We are pleased to inform you that with financial support from Late Dr. Ved Prakash Varma, Retired Professor and former Head, Department of Philosophy, University of Delhi, we have established "Krishna Kumari Varma Memorial Award" for outstanding blind students securing First or Second position in the concerned programme of the University in Master's Degree. The purpose of the Award is to encourage and inspire blind students to achieve highest position in their post-graduate examinations.

Sub: Krishna Kumari Varma Memorial Award 2025 for 1st/2nd

position holder blind students in Master's Degree.

The Award will be given to those blind students who have secured first or second position in their final post graduate examinations (except music and fine arts) for the academic year 2024-25. The Award consists of a sum of Rs. 40,000.00 (Rupees Forty Thousand Only), a certificate, a citation and a memento.

The following documents are required in case you recommend any student of your University for the above award:

उप कलसाप्य भ पत्र प्राप्ति तिथि 18-10-02

पत्र प्राप्ति समय : (2:) ०

1) Photocopies of the certificates of all the examinations duly attested by the Head of the Department concerned.

2) A certificate testifying the position of the candidate in order of merit in the University should also be sent along with the application form and this certificate should be signed by any two of the following:

(A) The Head of the Department or

(B) The Registrar

(C) Controller of Examination/Dean of the University.

3) A valid Disability certificate issued through UDID or by recognized Government hospital.

4. Passport size photograph.

Selected candidate along with his/her escort shall be provided to and fro AC 2 tier railway fare on concessional rates and hotel accommodation at the time of Award ceremony on 4th January, 2026.

While selecting a student for the Award, his/her whole academic career would be taken into consideration. Normally, the Award will be given to a student who obtains the first position in order of merit in the University. However, if such a candidate is not available in a particular year, the Award may be given to a student who secures the second position.

The Award will not be given to any one if no student is found qualified in a particular year or years. If in a subsequent year or years two students are found qualified for the Award, it may be given to both of them provided that in the previous year no one was found for a suitable for the award.

You are requested to give this Award maximum publicity amongst Visually Impaired Students of your University and send the particulars of eligible visually challenged students to this office latest by 20th November, 2025 in the enclosed application form.

Hoping for a positive response.

Thanking you,

Sincerely Yours,

J. L. Kaul Secretary General

with for use.

Fincl: Registration Form

ALL INDIA CONFEDERATION OF THE BLIND

Braille Bhawan, Institutional Area, Sector-5, Rohini, Delhi – 110085

Phone: 011-27054082 Tele-fax: 011-27050915

Email: <u>aicbdelhi@yahoo.com</u> Website: <u>www.aicb.org.in</u>

"APPLICATION FORM FOR THE "KRISHNA KUMARI VARMA MEMORIAL AWARD"

PERSONAL DETAILS

1) Full Name in Block letters	gradient and the same and the s
2) Date of Birth	Silvery of the second of the s
3) Present Postal Address	:
4) Permanent Address	:
5) Phone/Mobile Number	· · · · · · · · · · · · · · · · · · ·
6) Fax	
7) Email	· · ·
8) Onset of Blindness	
9) Present status of Eye sight	
	EDUCATIONAL QUALIFICATION
Matriculation or Equivalent Name of the Board or Universe	Examination versity :
b) Year	
c) Division	
d) Percentage of Marks	
11) Higher Secondary or Interme a) Name of the Board or Univ	ediate Examination versity:
b) Year	Managered
c) Division	
d) Percentage of Marks	

12) B.A. or Equivalent Examination			
a) Name of the Board or University	:	-	
b) Year	I		•.
c) Division	1		
d) Percentage of Marks	_ # T	P	
13) M.A. or Equivalent Examination	7 T	73	
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b) Year			
c) Division	and the same of the same of the same of	and in the same	a starte
d) Percentage of Marks	:		
		3.	
14) Participation in co-curricular activit	ies, such as Debate Competition	Essay Writing Contest	, Elocution
Contest, etc. (Please give details on	a separate sheet):		
		· z	
15) Any other special achievement s	:		
16) Signature of the Applicant			
U.A. wash			40
Name and Designation of the forwardin	g Authority:		
Date:			
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lote:		Contract of the State of	4
) Photocopies of the certificates of all	the examinations duly attached		and the second
oncerned.	the examinations duly attested	by the Head of the Dep	partment
			(w.)
A certificate testifying the position of	the candidate in order of merit	in the University shou	ıld also be ser
ong with the application form and this	certificate should be signed by	any two of the followi	ng
A) The Head of the Department			
3) The Registrar		in the second	
C) Controller of Examination/Dean of th	e University.		
A valid Disability certificate issued thro		vernment hospital	1. 4. 5.
Decement of		Hospital	

4) Passport size photographs.

5) Awardee shall get Rs. 40,000, Citation and Certificate on 4th January.