Application Form

Application Form for Scholarship Scheme for Faculty Members from Academic Institutions

1. PERSONAL PARTICULARS			
Name			
Date of Birth (DD/MM/YYYY)		Affix recent Passport size Photograph signed	
Postal Address		by the candidate and duly attested by the Head of the Deptt/Institution (DO NOT USE STAPLER OR PIN)	
Telephone Number			
Fax Number			
Mobile Number			
E-mail Address			
Note: Please enclose not more than 1000 wo	your recent curriculum vitae or resume and your recent	esearch proposal of	

2. ACADEMIC QUALIFICATIONS					
Examination Passed	Board/ Council/ University	Subjects	Year of Passing	Percentage	Remarks

3. JOB DESCRIPTION				
Name of the Institution				
Current Status/ Research Position at Institution				
Research interests				
List of three most relevant publications (if any)	 2. 3. 			

Note: Please enclose an official letter from your university/college bearing the official university/college stamp verifying your status at the time of application.

4. List of All Publications/Work-in-Progress				
Publications/Work-in-progress	Name of the Journal			