

Application Form

Application Form for Scholarship Scheme for Faculty Members from Academic Institutions 2024

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

[illegible]

3. JOB DESCRIPTION	
Name of the Institution	
Current Status/ Research Position at Institution	
Research interests	
List of three most relevant publications (if any)	1. 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