**INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH**

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**Application Form for Institutional Doctoral Fellowship (Full Term)**

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| **Name and Address  of the ICSSR Research Institute** |  |

|  |  |
| --- | --- |
| **Broad Discipline** |  |

**I. PERSONAL INFORMATION**

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| --- | --- | --- |
| **1.** | **Name of the Applicant** |  |
| **2.** | **a. Address for Communication**  **b. Mobile Number**  **c. Email ID** |  |
| **3.** | **Permanent Address** |  |
| **4.** | **Date of Birth (DD/MM/YYYY)**  **Age as on last date of application.** | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_,  \_\_\_\_\_ Years \_\_\_\_\_ Months |
| **5.** | **Indicate your category** | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | GEN |  | SC |  | ST |  | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Male |  | Female |  | Transgender |  | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Persons with Benchmark Disability | Yes |  | No |  | |
| **6.** | **Details of Ph.D. Registration**  Name and address of the University  Department  Date of Confirmed Registration  Last Date of Submission of Thesis  Title of Ph.D. Thesis | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Year: \_\_\_\_\_\_\_\_\_\_\_\_\_ Month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **7.** | **Name of the Supervisor**  Designation  Address  Mobile Number  Email ID  Area of Specialization | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **8.** | **Whether received any financial assistance from ICSSR:** Yes/No  If yes:  Year of Award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount sanctioned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Completion, if completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If incomplete, likely date of completion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Duration of the extension taken, if any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **9.** | **Whether received any financial assistance from any other institution e.g. UGC, ICAR. CSIR, ICPR, ICHR, etc.** Yes/No  If yes:  Year of Award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount sanctioned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Completion, if completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If incomplete, likely date of completion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Duration of the extension taken, if any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **10.** | **Mother’s Name**  **Mobile Number**  **Email ID** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **11.** | **Father’s Name**  **Mobile Number**  **Email ID** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**II. EDUCATIONAL QUALIFICATIONS & ACADEMIC ACHIEVEMENTS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Degree** | **Name of the University** | **Year ``of Passing** | **% of Marks** | **Division** | **Main Subjects** |
| B.A. |  |  |  |  |  |
| Master’s |  |  |  |  |  |
| M.Phil. |  |  |  |  |  |
| JRF/NET |  |  |  |  |  |
| SLET |  |  |  |  |  |

|  |  |
| --- | --- |
| **Papers in Journals, Edited Books/Reports Published, etc**  (details of up to best 5) | **1.**  **2.**  **3.**  **4.**  **5.** |

**Any other important academic achievement (approx. 100 words)**

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| **Name & Address of the Affiliating institution (including website, phone number, email ID)** |  |
| **Type of Affiliating Institution** | ICSSR Research Institute  Institute of National Importance  Central University  State University  College with Ph.D. Programme  Deemed University  Public funded research insitute having Ph.D. programmme |

**DETAILS OF THE PROPOSAL**

|  |  |  |
| --- | --- | --- |
| **14.** | **Details of Ph.D. Registration**  Date of Confirmed Registration  Last Date of Submission of Thesis  Title of Ph.D. Thesis | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Year: \_\_\_\_\_\_\_\_\_\_\_\_\_ Month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **15.** | **Study Implications** | Please summarize the expected impact of your study:  (a) How will it benefit the society at large (500 words).  (b) How it will be relevant for a definite policy area and policy making |
| **16.** | **Details of Published Articles/Papers/Publications (max. 5)** |  |

## **Declaration**

I hereby declare that:

1. I am not a defaulter of any previous ICSSR grant.
2. I have neither been subjected to any disciplinary action nor found guilty of any criminal offence in my career.
3. The Research Proposal and its contents are entirely original and as per the standard ethical practice.
4. I have not concealed any information in my fellowship application. If ICSSR finds any contrary information at any stage, it may cancel my fellowship out rightly and/or penalize as per ICSSR rules.

Place:

Date: **Signature of the Candidate**

**Annexure/Checklists (in the given order)**

1. Abstract of the Proposal (*up to 300 words*).
2. Detailed Research Proposal (*about 3000 words in the format as indicated in the guidelines*). In addition to this, applicants for Short-Term and Contingency Grant are required to submit the status report of their ongoing research work duly signed by the Supervisor.
3. One page academic CV of the applicant.
4. Brief academic CV of the Supervisor (2-3 pages)
5. Forwarding letter from the Head of the affiliating Institution duly stamped and signed on the letter head.
6. Self-attested Matriculation/Graduation/Post-Graduation/M.Phil. Certificates and mark sheets.
7. Self-attested copy of the Ph.D. Registration Certificate
8. Self-attested SC/ST certificate or certificate of disability issued by the competent authority.