**INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH**

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

**at**

**INSTITUTE OF PUBLIC ENTERPRISE**

**Osmania University Campus, Hyderabad – 500 007.**

(Name and Address of ICSSR Research Institute)

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

1. **Personal Information**

|  |  |  |
| --- | --- | --- |
| **1.** | **Name of the Applicant** |  |
| **2.** | **a. Address for communication**  **b. Mobile No.**  **c. Email ID** |  |
| **3.** | **Permanent Address** |  |
| **4.** | **Date of Birth (DD/MM/YYYY)**  **Age as on Last Date of application (04-07-2020)** | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_    \_\_\_\_\_ 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**  **Topic of Ph.D. Thesis**  (The Ph.D. topic must be confirmed, any substantial change in the topic afterwards may result in cancellation of fellowship) | **Year: Month:** |
| **7.** | **Name of the Supervisor** |  |
|  | Designation |  |
| Address of the institution |  |
| Mobile Number |  |
|  | Email ID |  |
| Area of Specialization of Supervisor |  |
| **8.** | **Whether received any financial assistance from ICSSR in the past**  Yes/No  If yes:  Name of the Award/Scheme \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Year of Award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount sanctioned Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If completed, Date of Completion, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If delayed, Reasons thereof for delay \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If incomplete, proposed date of completion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Duration of 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:  Name of the Award/Scheme \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Year of Award \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Amount sanctioned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If completed, Date of Completion, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If delayed, Reasons thereof for delay \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  If incomplete, proposed date of completion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Duration of extension taken, if any \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **10.** | **Mother’s Name** |  |
| Mobile Number |  |
| Email ID |  |
| **11.** | **Father’s Name** |  |
| Mobile Number |  |
| Email ID |  |

1. **Educational Qualifications and Academic Achievements**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Degree** | **Name of the University/ Organization** | **Year of Passing** | **% of marks** | **Division** | **Main Subjects** |
| Graduation |  |  |  |  |  |
| 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)**

**III-Affiliation Details**

|  |  |
| --- | --- |
| **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 having Ph.D. Programme  Deemed University  Public funded research institute having Ph.D Programme |

## **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 offence in my career.
3. The Research Proposal and its contents are entirely original and as per the standard ethical practices.
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**

## **Annexures /Checklist (in the given order) to be attached at the time of online submission**

**Annexure A:** Abstract of the research proposal (in 300 words).

**Annexure B:** The detailed research proposal (in 3000 words).

**Annexure C:** Notes on the Study Implications of research (in 500 words each):

(i) How will the study contribute to the existing body of knowledge in the area of research?

(ii) What are the expected implications of the study for policy planning and future researches in the area?

**Annexure D:** A note on the present stage of doctoral work (in 100 words each):

(i) What is the expected duration of the work and what is its stage at the time of submission of application?

(ii) The work that remains to be accomplished in the remaining period of the Ph.D. and their

Time-wise Milestones.

**Annexure E:** Following scanned copies of certificates to be attached

1. JRF-NET/SLET Certificate
2. Ph.D. Registration
3. Master’s Degree Certificate/Mark-sheet
4. Under-Graduate Degree Certificate/Mark-sheet

**Annexure F:** Forwarding Letter from the Supervisor

**Forwarding Letter by the Supervisor**

The Director/Registrar

(Name and Address of ICSSR Research Institute)

I, \_\_*(name of Supervisor)\_*\_ hereby certify that I am working as \_\_\_\_\_\_*(Designation)\_\_\_*\_ at \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Name of the Institution)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I am an approved Ph.D./PDF Supervisor of the Institute/University and have been supervising such PhD/PDF research work for last \_\_\_\_\_\_ Years.

I have so far supervised/guided \_\_\_\_\_\_ PhD works and \_\_\_\_\_\_ PDF research studies.

Currently, \_\_\_\_\_ number of scholars are registered under my supervision for PhD degree and \_\_\_\_\_\_ for PDF research studies.

I have read the application details of Mr/Mrs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for Doctoral Fellowship of Indian Council of Social Science Research, New Delhi.

I verify all details filled by Mr/Mrs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I have no objection to the scholar’s joining the Ph D programme of the ICSSR Research Institute, mentioned above, and working on his/her doctoral research under co-supervision of the institute’s faculty.

Signature of the Supervisor

(with name and stamp)

Place: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Official Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**