

Sl. No.

# NATIONAL INSTITUTE OF SCIENCE AND TECHNOLOGY



## APPLICATION FORM FOR THE AWARD OF JUNIOR RESEARCH FELLOWSHIP

**CATEGORY: DST SERB Funded**

**SUBJECT** \_\_\_\_\_

1. Name (in Block letters) : 

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First Name Middle Name (if any) Surname
2. Father's/Husband's Name : \_\_\_\_\_
3. Mother's Name : \_\_\_\_\_
4. Address for Correspondence : \_\_\_\_\_
5. Contact Telephone /Mobile No and E-mail ID : \_\_\_\_\_
6. Permanent Address : \_\_\_\_\_
7. Date of Birth : \_\_\_\_\_
8. Present Age (as on the date of applying) : 

Year			Month			Days	
9. Nationality / Religion : \_\_\_\_\_
10. Present Occupation : \_\_\_\_\_  
(Specify whether employed anywhere with details regarding post held, nature of employment and the status of the employer)
11. Whether doing M.Phil/M Tech. anywhere? : \_\_\_\_\_  
(if yes, give details of the Course/Programme session etc. Specify the probable date of completion of the course including that of the submission of dissertation)  
Whether NET/GATE/JRF
12. Qualified? If yes, please mention and copy to be enclosed. : \_\_\_\_\_

**13. Educational Qualification : (Photocopies of credentials to be attached)**

Exams. (Name of the Degrees starting from HSC)	Name of Institute	Affiliation University or Board	Year of Passing	Hons. Subject/ Subject for Master's degree, if any	Marks/ CGPA Obtained	Maximum Marks/ CGPA	D

**DECLARATION OF THE CANDIDATE**

I do hereby solemnly declare and affirm that the entries made above are true and that if any of the information furnished, proves to be materially false or incorrect, either wholly or partly, the Institute may cancel my Fellowship or take such other action as may be deemed fit.

Date:

**ENCLOSURES :**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

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*Full signature of the Candidate*