FORM-G



COUNCIL OF SCIENTIFIC AND INDUSTRIAL RESEARCH

Human Resource Development Group (Extra Mural Research Division) CSIR Complex, Library Avenue, Pusa, New Delhi – 110012

APPLICATION FORM FOR JUNIOR/SENIOR RESEARCH FELLOWSHIPS/ ASSOCIATESHIP UNDER CSIR EMERITUS SCIENTIST SCHEME

EMERITUS SCIENTIST SCHEME
1. Title of the scheme:
2. Emeritus Scientist's name, designation and place of work:
3. Sanction number of the scheme and duration:
4. Full name of Applicant in block letters (surname is to be underlined):
5. Present address:
6. Permanent address:
7. Whether belonging to SC/ST/OBC? Yes/No (If yes, the name of Caste/Tribe may be mentioned and certificate enclosed):
8. Date of birth:
9. Nationality:
10. Father's/Husband's name:
11. Educational qualifications (bachelor degree onwards):
a) Degree/Diploma
b) University/Institute
c) Subject(s)
d) Year of passing
e) Division/Grade
f) Marks Percent

12. Are you registered for a higher degree? Yes/No

(a) If 'yes' please indicate

(ii) University			
(iii) Date of reg	gistration		
(b) If 'no' please inc	licate whether you propose to reg	gister for a higher degree? Ye	es/No
	rch/teaching experience? Yes/No bout the institution, duration of w	vork, emoluments and work	done
4. Have you been a recipient of a research fellowship before? Yes/No If 'yes', please give details of the dates, and amount of award, duration and names of the concerned Scheme, Principal Investigator, Institution and Supporting Agency.			
	n reprints of published work and in terms of name(s) of author(~
16. DECLARATION			
I am willing to wor	k as a Junior/Senior/Research Fe	llow/Associate in the resear	ch scheme entitled
research under the Conditions of CSIR	Associateship is awarded to me, e guidance of the Principal Invest Research Grants' and accept and teship is co-terminus with the Sch	tigator of the scheme. I have agree to abide by these. I h	ve read 'Terms and
I certify that, to the correct.	ne best of my knowledge and bel	ief, the particulars given in	this application are
Date:		Signatu	re of the Candidate
17. ATTESTATIONS (by	the ES and Head of the Institution):	
the advice of the d	formation given by the applicant, in uly appointed Selection Committe Research Fellowship/Research Ass	ee the candidate is recomme	nded for the award
Date :			Signature and Name of Emeritus Scientist

(i)Title of the degree

Necessary facilities will be provided to the duration of the scheme.	Research Fellow for work on the above problem for the
Date:	Signature and Name of the Head of the Institution with seal