**APPLICATION FORM FOR PROJECT FELLOW**

PHOTO

**RUSA 2.0**

**INTERNAL QUALITY ASSURANCE CELL (IQAC)**

**BHARATHIAR UNIVERSITY, COIMBATORE-641046**

 **(*Application complete in all aspects should be submitted to the given EMAIL-ID ONLY)***

**Title of the Project:**

**Name of the Principal Investigator:**

**Name of the Department:**

1. Name (in **Block Letters**) 2. Gender **(Tick Appropriate)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Male |  | Female |  | Transgender |  |

3. Date of Birth 4. Age as on 01.01.2019

5. Nationality 6. Any fellowship/scholarship received

7. Community **(Attach Attested Copy)** 8. Aadhar Number **(Attach Attested Copy)**

BC / MBC / ST / SC / OTHER

9. Applicant’s Mobile Number 10. Applicant’s Email id

11. Father’s Name 12. Father’s Occupation

13. Permanent Address **(Attach Address Proof)** 14. Communication Address **(Attach Address Proof)**

15. Educational Qualifications **(Attach attested copies as proof)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Course | Subject | Institution Studied | % of marks | Class | Year of completion |
| H. Sc. |  |  |  |  |  |
| B. Sc. |  |  |  |  |  |
| M. Sc. |  |  |  |  |  |
| M. Phil. |  |  |  |  |  |
| Ph. D. |  |  |  |  |  |

**Any other research experience, Papers Published, Conferences Attended *etc*. - Attach in a separate sheet as Annexure**

16. Additional Qualifications **(Attach attested copies as proof)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Exam | Year of Passing | Score / Rank | Any other Exam | Year of Passing | Score / Rank |
| SET |  |  |  |  |  |
| NET |  |  |  |  |  |
| GATE |  |  |  |  |  |

19. Any Other Details (Ph.D. Registration Number & Date etc.,)

|  |
| --- |
| Declaration by the applicant |
| I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby DECLARE that all the information furnished by me in the application form is true. If the information provided found to be false, University have rights to take action.**Date: Signature of the Applicant** |