

# INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH

## Application for Senior Fellowship

<b>1.</b>	<b>Name of the Applicant</b>	
<b>2.</b>	<b>Present Position and Institutional Address of the Applicant, if any</b>	Telephone of the Applicant:
		Mobile of the Applicant:
	<b>Mailing Address of the Applicant</b>	Email of the Applicant:
<b>3</b>	<b>Date of Birth</b>	
<b>4</b>	<b>Indicate the categories to which the applicant belongs</b> <i>(Tick one or more boxes, as applicable. Enclose relevant certificates, if any, as Annexure VIII)</i>	<u>Social:</u> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/>
		<u>Gender:</u> Male <input type="checkbox"/> Female <input type="checkbox"/>
		<u>Religious Minority:</u> <input type="checkbox"/> (As defined by the National Minority Commission)
		<u>Differently Abled:</u> <input type="checkbox"/>
<b>5</b>	<b>Indicate whether the applicant is from</b> <i>(Tick one or more box, as applicable. For Educationally Backward Districts, see the list on ICSSR website)</i>	North East States <input type="checkbox"/>
		Educationally backward districts <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mention district
<b>6</b>	<b>University/Institutes/Organisation where the grant is to be administered</b> <i>(Please give complete address. In case it is a private institution, please furnish information as given in Annexure V.)</i>	Phone no. <input type="text"/> Fax: <input type="text"/> Email: <input type="text"/> Website <input type="text"/>

7	<b>Type of Institution where the grant is to be administered</b>	Central University <input type="checkbox"/> State University <input type="checkbox"/> ICSSR Research Institute <input type="checkbox"/> Other public funded research institute <input type="checkbox"/> Public Deemed University <input type="checkbox"/> Private Deemed University <input type="checkbox"/> State Private University <input type="checkbox"/> Government College <input type="checkbox"/> Aided Private College <input type="checkbox"/> Unaided Private College <input type="checkbox"/> NGO/ Registered Society <input type="checkbox"/> Other (please specify)																		
8	<b>Educational Qualification and academic attainments of the applicant</b> <i>(Please enclose brief academic CV as Annexure II)</i>																			
9	<b>Indicate if the applicant has received any ICSSR grant previously</b>  <i>(Please tick)</i>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;"><b>Ongoing</b></th> <th style="text-align: center;"><b>Completed</b></th> </tr> </thead> <tbody> <tr> <td>Research Projects</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Fellowships</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Seminar Grant</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>International Travel</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Publication Grant</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>		<b>Ongoing</b>	<b>Completed</b>	Research Projects	<input type="checkbox"/>	<input type="checkbox"/>	Fellowships	<input type="checkbox"/>	<input type="checkbox"/>	Seminar Grant	<input type="checkbox"/>	<input type="checkbox"/>	International Travel	<input type="checkbox"/>	<input type="checkbox"/>	Publication Grant	<input type="checkbox"/>	<input type="checkbox"/>
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10	<b>If completed, specify</b>	Date of Completion <input style="width: 150px;" type="text"/> Report submitted Yes <input type="checkbox"/> No <input type="checkbox"/>																		

<b>11</b>	<b>Title of the Proposal of Research</b> <i>(Please enclose a copy of the proposal/synopsis, along with an abstract, as per the format given in the Guidelines)</i>	
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Declaration

I hereby declare that the entries above and in the enclosed annexures are factually correct and no facts have been hidden by me.

If any of the above information supplied by me is proved to be incorrect, my application may be cancelled at any stage of the award.

Place:

Date:

**Signature of the Candidate**

**Annexure/Checklists**

1. Abstract of the Proposal as per Annexure I with this form
2. Brief academic CV of the applicant as Annexure II
3. Summary of Research Proposal in about 750 words, as Annexure III
4. Detailed Research Proposal in about 3000 words, as Annexure IV
5. Institutional Profile as per Annexure V with this form (Only for proposals from non-public institutions)
6. Salary certificate and no-objection from the employer, if applying under salary protection scheme as Annexure VI
7. Forwarding letter from the Head of the Institution where the Fellowship will be located as Annexure VII
8. Duly attested SC/ST certificate, if applicable, as Annexure VIII.

**ANNEXURE I**

**ABSTRACT OF SENIOR RESEARCH FELLOWSHIP PROPOSAL**

1	<b>Title of the Fellowship Proposal</b>	
2	<b>Broadly, the discipline of Social Sciences (and sub-themes) in which the applicant's Ph.D. could be located</b> <i>(Please refer to the Guidelines for a list)</i>	
3	<b>Nature of the study</b> <i>(Please tick)</i>	Field work intensive <input type="checkbox"/> Secondary source intensive <input type="checkbox"/> Limited fieldwork based <input type="checkbox"/> Theoretical study <input type="checkbox"/>
4	<b>In case of fieldwork intensive, specify the scope</b> <i>(Please tick)</i>	Less than district level <input type="checkbox"/> Comparative district level study <input type="checkbox"/> State level study <input type="checkbox"/> Comparative state level study <input type="checkbox"/> National level/more than two states <input type="checkbox"/> Involves international travel <input type="checkbox"/>

5	<b>Duration of the study</b> <i>(In months)</i>	Review of literature/data sources <input data-bbox="1157 219 1302 264" type="text"/> Field work, if any <input data-bbox="1157 293 1302 338" type="text"/> Data/theoretical analysis <input data-bbox="1157 367 1302 412" type="text"/> Report writing <input data-bbox="1157 441 1302 486" type="text"/> Total duration <input data-bbox="1157 515 1302 560" type="text"/>
6	<b>Applying under</b> <i>(Please enclose salary certificate from employer as Annexure VI, if applying under salary protection scheme)</i>	Salary Protection Scheme <input data-bbox="1157 645 1232 712" type="checkbox"/> Regular Fellowship Scheme <input data-bbox="1163 801 1238 869" type="checkbox"/>

(Signature of the applicant)

Name \_\_\_\_\_