**POST DOCTORAL FELLOWSHIP (PDF), 2022-2023**

**Application Form**

Advertisement/Notification No: 01/2023/ICHR/SAF& PDF (Notification 2022-2023) Date:

*Address your application to:*

Affix your latest self attested Photograph and attach another with application form.

## To,

**The Member Secretary,**

**Indian Council of Historical Research, 35, Ferozeshah Road,**

**New Delhi - 110 001**

1. **PAYMENT INFORMATION:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Demand Draft No\*. | Amount \* | Issuing Bank \* | Branch \* | Date \* |
|  |  |  |  |  |

1. **PERSONAL DETAILS:**
2. **Name** *(in capital Letters)* \*:

*(As per SSC Certificate)*

1. **Gender** \*: Male/Female/Third Gender
2. **Date of Birth** \*: DD / MM / YYYY

(*As per SSC Certificate*)

## Name of Father \*:

1. **Name of Mother** \*:
2. **Nationality** \*:
3. **Address for Communication** \*:

House No: Street/Locality \*: Landmark\*:

City \*: State \*: Pin Code \*:

1. **Permanent Address** \*:

House No: Street/Locality \*: Landmark\*:

City \*: State \*: Pin Code \*:

1. **Email ID** \*:
2. **Contact No**: Landline: Mobile\*:
3. **Do you belong to SC/ST Category** \*: Yes/No

If yes, please specify the Category:

(*Please attach self-attested copy of the Category/Caste/Tribe Certificates from appropriate authority\**)

1. **Are you Physically Challenged?** \*: Yes/No

If yes, please specify: (i) Visually Impaired ii .Cerebral Palsy iii. Orthopedically Challenged (*Please attach self-attested copy of the Certificates from appropriate authority\**)

1. **Language Skills;** Reading, Writing, Speaking:

## Present Occupation:

If employed, give the details:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Present Position Held | Organization | Nature of Employment  (Permanent/Temporary/Part Time/Contractual) | From (date) | Basic Salary |
|  |  |  |  |  |

## ACADEMIC DETAILS:

1. **Details of Ph. D. Degree:**

|  |  |  |  |
| --- | --- | --- | --- |
| Title | Date of award of degree | Name & designation of the Supervisor | Name of the University with related state/UT |
|  |  |  |  |

*Note: The candidate shall carry a copy of Ph.D. thesis at the time of Presentation-cum-Interview.*

1. **Other Research/Teaching Experiences**, if any:
2. **No. of Published Research Papers**, if any:

*Note: Please attach Published Research Papers and their details along with title in a separate sheet with application form.*

# PROPOSAL DETAILS FOR POST DOCTORAL FELLOWSHIP (PDF):

|  |  |  |  |
| --- | --- | --- | --- |
| Title  (*Please attach five copies of synopsis***\***) | Specialization  (*Ancient/Medieval/ Modern*) | Name and Designation of the Supervisor  (*Please attach Recommendation/consent Letter*) | Name of the Institution of Affiliation  (*Please attach Affiliation Letter*) |
|  |  |  |  |

***Note: Submit a detailed proposal in the following format:***

* + ***Statement of the Problem***
  + ***State of Knowledge in the Field***
  + ***Review of other releated works done on the subject***
  + ***Research Questions***
  + ***Research Objectives***
  + ***Research Methodology***
  + ***A tentative chapter design***
  + ***Bibliographical note with a list of primary sources to be consulted***
  + ***Knowledge of Language(s) of the sources***

# OTHER DETAILS:

1. **Whether the applicant has/had applied for financial support elsewhere for the same Research Proposal**: YES / NO (*If yes, specify the funding agency approached*\*)
2. **Details of financial assistance received for the present research work from ICHR or any other sources:**
3. **Scholarship/fellowship previously received/receiving (if any) from ICHR or any other organizations**: YES / NO (*If yes, please give the details and attach Completion Certificate*\*)

|  |  |  |
| --- | --- | --- |
| Name of Scholarship/Fellowship with File Number | Value/Grant | Whether the work for which fellowship/ scholarship  was awarded has been completed |
|  |  |  |

I DECLARE THAT:

* **The statements made by me in this form and the documents that are attached are true to the best of my knowledge.**
* **I have read the rules concerning the award of research fellowships of the Indian Council of Historical Research and I agree to abide by them, if a fellowship is awarded to me. I shall refund to the ICHR the funds made available to me, if I fail to report the progress of my work every 6 months, or if I fail to carry out the work of research properly or if it is not completed.**
* **I am not in receipt of any other financial assistance/salary from any other source for the topic cited above.**
* **If selected, I will work on a whole-time basis for the Fellowship, submit 6 monthly progress reports and will not accept any other fellow ship or financial assistance or employment.**
* **Should I decide to discontinue the fellowship without completing the Research work I shall refund the entire amount (fellowship plus contingency grant) received for the purpose.**

Date \* Signature \*

Place \*

***Enclosure’s Check List:*** *(Please mark/tick to given below checklist)*

1. ***Ph.D. Award Letter/Certificate***
2. ***Date of Birth Certificate***
3. ***Category Certificate***
4. ***Bio-Data***
5. ***Supervisor Recommendation Letter***
6. ***University/Institution Affiliation Letter***
7. ***Research Proposal/Synopsis for PDF (in five copies) as per notification***
8. ***Copy of Ph.D. thesis/dissertation***

Note :

* The scholar must send an electronic version of his/her research proposal in MS Word and PDF format along with his/her application, on [dd.pdf@ichr.ac.in](mailto:dd.pdf@ichr.ac.in) before **30.09.2022.**