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Form No :



For Office Use

Registration No.....

NATIONAL INSTITUTE OF SIDDHA

APPLICATION FORM FOR RESEARCH FELLOWSHIP (Ph.D) - GUNAPADAM

Application Form is to be filled by the Candidate in his/her own handwriting, only after reading the accompanying prospectus.

1. Name
2. Father's /Husband's Name.....
3. Date of Birth
4. Nationality
5. State of Domicile
6. Postal Address
- PIN
7. Phone Mobile.....e- mail....
8. Category (Please tick(✓)the appropriate)
 SC ST OBC GENERAL

Affix a recent
passport Size
Photograph
duly signed

Certificates obtained after March 2015 for OBC as per GOI norms from the Competent Authorities are mandatory.

- State Govt. Nominee (Application must be forwarded through Competent Authority)
- Central Govt. Nominee (Application must be forwarded through Competent Authority)
- Other (Please specify)

9. Details of Qualifying Examinations:

Name of Examination	Board/University	Year and Month	No.of Attempt	Marks obtained (%)
Matric/SSC/Equivalent				
HSSC(10+2) Equivalent				
I yr.BSMS				
II yr.BSMS				
III yr BSMS				
IV yr BSMS				
V yr BSMS				
I yr MD (Siddha) - Subject				
II yr MD (Siddha)				
III yr MD (Siddha)				
Title of Thesis				

First / Second Provisional certificates for CRR, Central Council / State Siddha council registration should be attached

10. Give Structured Particulars of Research Problem (Add separate Sheets).
(Title, Introduction, Materials & methods, Time scale, study design, Projections etc.)

11. Name & designation of the Guide
(Certificate from Guide should be attached)

12. Name & designation of the Co-Guide

13. Whether you are already registered for
Fellowship. If yes attach details.

14. Attach details of Papers Published with
copy of reprints

15. Attach details of present employment
Along with no objection certificate.

16. Any other relevant information

17. List of Enclosures

DECLARATION

I here by declare that,

I have read the rules regarding award of Research Fellowship (Ph.D) of the National Institute of Siddha Chennai and in the event of a Fellowship being awarded, I undertake to engage myself whole time for the work on the subject under the direction of the Guide during the tenure of the Fellowship. I further declare that, to the best of my knowledge and belief, the particulars given in the form are correct.

Place:

Date:

Signature of the Candidate.