



Application form
AcharyaPrafulla Chandra Research Grants

1. Name of the Applicant (in Block Letter):
2. Date of Birth: / /
3. Department:
4. Date of joining in the present post:
5. Date of Confirmation and No of GB meeting in which confirmation was approved:
6. Designation (Associate Professor/Assistant Professor/SACT):
7. Educational Qualifications (from Masters onwards):

Sl. No.	Degree/ Diploma	Year of Passing/Being Awarded &Name of University
1.	M A/M Sc/M Com	
2.	M Phil	
3.	PhD	
4.	Other(s)	

8. Title of your proposed Research for which the grant is sought (Please see Guidelines for submission of Research Proposal):

I hereby solemnly declare that all the information furnished above are true to the best of my knowledge. I also declare that on receiving the grant I'll utilise it for the purpose it is sanctioned.

Date:

(Signature of the Applicant)