Forwarding letter by the Affiliating Institution  
(By Head of the University/ College/ Institution)

The Director  
Dr. Ambedkar International Centre  
15 Janpath  
New Delhi 110001

The ____________________________ (Name of the organisation) forwards this application of ___________________ (Name of the applicant) for Dr. Ambedkar Post –Doctoral Fellowship by DAIC.

We agree to administer the funds released by DAIC, provide basic research infrastructure and provide the material and managerial assistance for the Fellowship. We shall maintain a dedicated bank account for DAIC grant that is duly registered at PFMS portal for release of the Fellowship grant. 

If the scholar receiving the Fellowship leaves our institution to join some other institution after part of the sanctioned fellowship has been received, we would have no objection to the transfer of the fellowship to a new institution, if the DAIC approves it. The institution, however, shall be responsible for submitting the audited statement of accounts and utilization certificate for the time period of the fellowship received.

On completion of the fellowship, with due permission of DAIC, the institution may take possession of books/periodicals/equipment purchased out of the contingency grant for the scholar and depositing the unspent amount to the DAIC.

Signature of the Director of the Institute/ Registrar/ Principal
(with name and stamp)

Place: 
Name:__________________________

Date: 
Designation: ______________________

(Signature of the applicant)

Name__________________________
1. Name of applicant (BLOCK LETTERS):

2. Father/Husband’s Name:

3. Mother’s Name

4. Date of Birth

5. Address for Communication:

6. Permanent Address:

7. Proposed Topic

8. Academic qualification:

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<thead>
<tr>
<th>Examination</th>
<th>Year</th>
<th>University</th>
<th>% of marks &amp; division</th>
<th>Subject Studied</th>
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<td>10+2</td>
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<td>Graduation</td>
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<td>Post-graduation</td>
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<td>Ph. D.</td>
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9. Details of research experience (please use separate sheers if necessary)
   Number of publication of research papers: write title and source and attach copies (5 page only)
   i.
   ii.
   iii.
   iv.
   v.

10. Title of Ph. D. thesis: ____________________________

11. Name of University/ Institution/ College in which affiliation is sought for Fellowship:

12. Category-- UR, OBC, SC, ST, EWS.

13. Any other relevant information:
I certify that all the information provided by me in this form are true to the best of my knowledge and I am not in receipt of any other award/fellowship/scholarship.

14. I also undertake to state that all the conditions under the scheme are acceptable to me.

Signature of the Candidate
Name:
Date:

15. Certified that:
   I. I recommend the candidate for the award and undertake to guide/supervise him/her for the research work. General facilities required such as laboratories, equipment, etc. are available in the department and will be provided to the applicant.
   II. No foreign exchange is required for taking up this project
   III. This research proposal has not been submitted to any other agency for financial assistance.

Signature
Name
Date
Designation of Supervisor

Necessary facilities are available and will be provided for the research work on the above topic during the tenure of the award.

Signature
Name
(Head of the Department)

Signature
Name
(Head of the Department/Department/Principal)

Note: Attach self-attested copies of all the documents mentioned in this form.