

FORMAT OF APPLICATION FOR "JUNIOR RESEARCH FELLOW"

Name in Capital	
Address	
Male/Female	
DOB (dd/mm/yyyy)	
Professional Exam. (GATE/CSIR-NET, etc.)	
Phone	
Email	

Educational Qualification			
Institute/Board	Exam Passed	Year of Passing	% of Marks/CPI
	10 th Class		
	12 th Class		
	B.Sc. or Equivalent		
	M.Sc. (Mathematics) or equivalent		

Details of the completed project (if any) during the Master's Degree:

Signature of applicant

Date: