FORM-G

COUNCIL OF SCIENTIFIC AND INDUSTRIAL RESEARCH Human Resource Development Group (Extra Mural Research Division) CSIR Complex, Library Avenue, Pusa, New Delhi – 110012

APPLICATION FORM FOR JUNIOR/SENIOR RESEARCH FELLOWSHIPS/ ASSOCIATESHIP UNDER CSIR RESEARCH SCHEME

1. Title of the scheme: “**Discovery of Therapeutic Candidates for the Treatment of Zika Viral Infection by using Advanced Computational Techniques”**

2. Principal Investigator's name, designation and place of work: **Dr. N.R. Jena, IIITDM Jabalpur**

3. Sanction number of the scheme and duration: **01(3061)/21/EMR-II , 3 yrs**

4. Full name of Applicant in block letters (surname is to be under-lined):

5. Present address:

6. Permanent address:

7. Whether belonging to SC/ST/OBC? Yes/No (If yes, the name of Caste/Tribe may be mentioned and certificate enclosed):

8. Date of birth:

9. Nationality:

10. Father's/Husband's name:

11. Educational qualifications (bachelor’s degree onwards):

a) Degree/Diploma

b) University/Institute

c) Subject(s)

d) Year of passing

e) Division/Grade

f) Marks Percent

12. Are you registered for a higher degree? Yes/No

(a) If 'yes' please indicate

(i)Title of the degree

(ii) University

(iii) Date of registration

(b) If 'no' please indicate whether you propose to register for a higher degree?

Yes/No

13. Have you any research/teaching experience? Yes/No

If yes, give details about the institution, duration of work, emoluments and work done

14. Have you been a recipient of a research fellowship before? Yes/No

If 'yes', please give details of the dates, and amount of award, duration and names of the concerned Scheme, Principal Investigator, Institution and Supporting Agency.

15. Publications (attach reprints of published work and copies of papers communicated and give list of published papers in terms of name(s) of author(s), title, journal, year and volume and page numbers):

16. DECLARATION I am willing to work as a Junior/Senior/Research Fellow/Associate in the research scheme entitled .............…...…………………………………………………………………………………………………………………………………………

If the Fellowship/Associateship is awarded to me, I undertake to engage myself whole time for research under the guidance of the Principal Investigator of the scheme. I have read 'Terms and Conditions of CSIR Research Grants' and accept and agree to abide by these. I have noted that the Fellowship/Associateship is co-terminus with the Scheme. I certify that, to the best of my knowledge and belief, the particulars given in this application are correct.

Signature of the Candidate Date:

17. ATTESTATIONS (by the PI and Head of the Institution):

I certify that the information given by the applicant, including that in Columns 8 and 11 is correct. On the advice of the duly appointed Selection Committee the candidate is recommended for the award of a Junior/Senior Research Fellowship/Research Associateship for the duration of the Scheme from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date: Signature

(Name and Designation of the Principal Investigator)

Necessary facilities will be provided to the Research Fellow for work on the above problem for the duration of the scheme.

Date: Signature

(Name of the Head of the Institution with seal)