

#### हैदराबाद विश्वविद्यालय UNIVERSITY OF HYDERABAD

O/o. the Dean, Students Welfare Fellowships & Scholarships Section

Ref. UH/ DSW/F&S/2022/12 7-5

28<sup>th</sup> March 2022

#### **CIRCULAR**

Sub: Submission of Attendance / Continuation Certificates through 'Google Form' - Reg.

This is to bring to the notice of all fellowship / scholarship holders of UGC and CSIR and concerned Supervisors, Heads / Deans that the UGC and CSIR has been disbursing fellowship / scholarship under various schemes through online, which is integrated with PFMS for payment through DBT mode. The monthly payment to the awardees are generated automatically on the web portal based on the confirmation of monthly attendance / continuation certificate of the candidates duly endorsed by the concerned supervisor and Head / Dean of department / school. The option to update / upload the monthly attendance / continuation certificate in the UGC-Canara Bank portal and CSIR New FMS portal portal will be available from 1<sup>st</sup> to 15<sup>th</sup> of every month and from 1<sup>st</sup> to 10<sup>th</sup> of every month, respectively.

In this connection, all fellowship holders ( UGC, CSIR, DST INSPIRE, DBT JRF, ICMR, ICSSR, NBHM, etc.) are hereby informed that the Fellowships & Scholarships Section has designed a google form, in order to facilitate the individuals to upload the soft copy of the 'Monthly Attendance / Continuation Certificate' of preceding month, duly signed / certified by the Supervisor and Head / Dean of the Department / School, directly through google form, to avoid the submission of physical copy to the Fellowship & Scholarship Section. The fellowship / scholarship holders are directed to complete the submission of monthly attendance / continuation certificate through google form, on or before 5<sup>th</sup> of every month.

Steps to be followed for uploading monthly attendance / continuation certificates through Google Form, is provided in the separate sheet and all the fellowship / scholarship holders are advised to follow the same. The fellowship / scholarship holders are free to contact this section through email: <a href="mailto:fss-dsw@uohyd.ac.in">fss-dsw@uohyd.ac.in</a> for any difficulties during submission of the google form and uploading the relevant documents.

Based on the information and documents submitted by the fellowship / scholarship holders through google form, the section will verify and update the same in the respective web portals for release of fellowship through DBT mode and also initiate the payment of fellowships in the offline mode through Finance & Accounts.

If any of the fellowship / scholarship holders fails to submit his / her continuation / attendance certificate through google form, within the above stipulated date, the same will be processed and updated / uploaded in the respective web portals along with the next month fellowship claim.

All the Supervisors are advised to verify the status of semester registration of the fellowship / scholarship holder, before they affix signature on the Attendance / Continuation Certificate.

Prof. Santosh R Kanade Deputy Dean Students' Welfare

Note: All types of forms relating to fellowships / scholarships of various agencies are attached herewith for the use of fellowship holders.

То

1. Webmaster - with a request upload in the UoH website

2. Director, CNF - with a request to circulate among all the Deans / Heads / faculty and all the students



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O/o. the Dean, Students Welfare Fellowships & Scholarships Section

### Steps to upload Continuation / Attendance Certificates through Google Forms

Step 1: visit UoH website www.uohyd.ac.in

Step 2: click on 'Study @ UoH' tab in the Home Page

Step 3: click on 'Scholarship Updates' under the 'Study @ UoH'

Step 4: click on "Submit and Upload Attendance / Continuation Certificate'

Step 5: A google form will automatically opens in the web browser, if the candidates already logged-in through his / her mail account of University (Ex: xxxx@uohyd.ac.in)

or

Browser will automatically direct you to login to your mail account of University (Ex: xxxx@uohyd.ac.in) and thereafter a google form will be opened in the web browser.

Step 6: Fellowship Holders are required to fill the google form carefully and required to upload Attendance / Continuation Certificate (attached along with Circular) duly certified and signed by the Supervisor, Head / Dean and and also Non Boarder certificate for the attendance / continuation period, issued by Chief Warden, if he / she is claiming HRA. (Please upload as a single file in PDF and name of the file should be your Reg. No., ex: "21XXXXX21").

**Note:** If a Non Boarder scholar fails to attach his / her Non Boarder Certificate, he / she shall be treated as Boarder and the F&S Section is not responsible for that.

Step 7: After completing the google form and uploading documents, candidates are required to click on the "Submit" button at the bottom of the form. After submission of the form, an auto email along with response submitted by the candidate, will be sent to the email id of the candidate.

Based on the submission and uploaded documents, the Fellowships and Scholarships Section, will update / upload the attendance / continuation of the fellowship holder in the respective web portals for release of payment.

27-3-22



### हैदराबाद विश्वविद्यालय UNIVERSITY OF HYDERABAD

#### O/o. the Dean, Students Welfare Fellowships & Scholarships Section

### Forms (Fellowships & Scholarships Section)

S No	Name of the Form	Purpose	Page Nos / Link
1	Joining Report	For joining in the UGC - NET JRF Joining Report	4 - 5
		For joining in the UGC - MANF Joining Report	6 - 7
		For joining in the UGC - NFSC Joining Report	8- 9
		For joining in the NFST Joining Report	10
		For joining in the UGC - NFOBC Joining Report	11- 12
2	Proforma for Activation of DBT Mode (DBT Form)	For activation of any fellowship under DBT Mode (to be submitted along with joining report)	13 - 14
3	Continuation Certificate	For release of monthly fellowship	15
4	HRA Certificate	For release of monthly HRA (accepted only along with the latest Non Boarding Certificate issued by O/o. Chief Warden)	16
5	Contingency Certificate	For release of quarterly contingency (accepted only along with original bills / vouchers and statement of expenditure)	17
6	CSIR - JRF Joining Report	For joining in the CSIR - JRF Scheme	18 - 19
7	CSIR - Attendance Certificate	For release of monthly fellowship and HRA (HRA will be accepted upon submission of latest Non Boarding Certificate issued by O/o. Chief Warden)	20
8	UGC -Upgradation Form	For upgradation of JRF to SRF (3 Members Assessment Committee Report)	21
9	CSIR - Grant-in-Aid Claim Bill	For release of monthly Post Doctoral Fellowship	22
10	ICSSR - Grant-in-Aid Bill	For release of Post Doctoral Fellowship (on half yearly basis)	23
11	Format for issue of ID Cards for PDFs	For issue of Id Cards to Post Doctoral Fellows	24

#### ANNEXURE-II

#### UNIVERSITY GRANTS COMMISSION BAHADURSHAH ZAFAR MARG, NEW DELHI – 110002

SA-I SECTION

## PASSPORT

SIZE PHOTO

#### JOINING REPORT

#### JRF in Science, Humanities & Social Sciences

Name of F	Name of Fellow:					
Award let	Award letter number and date or UGC Circular number and date:					
Tribin in An	4:C. 414					
	•		, ,			
			<u> </u>			
(M.Phil/Ph	.D.) in the	subject of	under the above scheme of the JRF in			
Science,	Humanities & So	cial Sciences stud	ents of University Grants Commission with effect			
from		fy that				
from						
provided	with all necessary faci	lities during his/her	tenure of award. The terms and conditions of the offer are			
acceptable	to Awardee.	-				
•						
. A	also certified that fe	llow shall not acce	ept /hold any emoluments paid or otherwise or receive			
emolument	s, salary, stipend, etc.	from any other sou	rce during the tenure of the award.			
	• • •	ř				
C:	C:	G:	G			
Signature Name	Name	Ü	C			
Date						
Awardee	Guide/Supervisor	•				
Ph. No.	(Seal)	(Seal	•			
Mobile : E.mail :			. 9,			
Bank A/c N	Vo.					
IFSC Code						
Adhaar No	. (if any)					

#### TO WHOM IT MAY CONCERN

It is certified that the original certificates of the candidate in respect of	Mr./Ms	has
been checked as per detail below and the candidate fulfil the minimum	eligibility cond	ditions for Junior Research
Fellowships:		
		•

PURPOSE	Checked or not (Write Yes or No)	Whether copy enclosed or not	Remarks, if any
Whether the candidate disabled (PWD)			
Whether candidate have 55% in Master's Degree for General/OBC of Non-creamy layer).			
Whether candidate have 50% for SC/ST/PWD.			
Whether candidate more than 28 years of age as on the first day of the month of NET examination (i.e., 1 <sup>st</sup> June/December) and relaxation by five years for SC/ST/PWD/OBC (non-creamy layer) and female candidates. Relaxation in age up to 3 years to candidates who have done LLM. Total relaxation on the above ground(s) can not exceed five years.			

(Head of the concerned Department) University/College/Institute (Seal) (Registrar/Principal/Director) University/College/Institute (Seal)

#### Annexure-I

#### University Grants Commission New Delhi-110002

VE	Maulana Azad National Fellowship for M (MANF) CRIFICATION FORM CUM JOINING REPORT FOR UNDER THE SCHEME	PHOTOGRAPH OF CANDIDATE
1	Name of Scholar/Candidate	
2	Date of Birth	
3	12 digit unique AADHAAR Number	
4	Whether belong to Minority Community as notified by the Central Government	
5	No. of UGC-NET e-Certificate for eligibility for Assistant Professor	
6	MANF-2020-21 Award letter Number and UGC-Ref.No.	
7	Year of passing of Master's Degree or equivalent examination	
8	Percentage of Marks in Master's Degree or equivalent examination	
9	Pursuing research for M.Phil or Ph.D	
10	Date of Admission for M.Phil/Ph.D	
11	Whether registered for M.Phil/Ph.D	TOTAL CONTROL OF THE PARTY OF T
12	If already registered, give date of registration	
13	Whether pursuing research through full time regular mode	
14	Whether engaged in any type of employment (part-time/ad-hoc/full time or any other)	`
15	Name of University where admitted for M.Phil/Ph.D	
16	Name of Institution where pursuing research	
17	Name, designation and official address of SUPERVISOR. (Only a full time regular teacher of concerned university/institution can act as a supervisor)	
18	Whether received (earlier) or receiving any other fellowship/ scholarship/ monetary assistance from UGC or any other source for pursuing M.Phil/Ph.D. (If yes, give details)	
19	I hereby declare that each and every fact given above is true and correct, I also authorise UGC to recover any excess/wrong payment from me.	•
20	Signature of candidate with date	

#### University Grants Commission New Delhi-110002

#### CERTIFICATE BY THE INSTITUTION

	rmation given in the VERIFICATION FORM CUM JOINING
REPORT FOR AVAILING FELLOWSHIP	UNDER THE SCHEME (Annexure-I) as given by the candidate
Mr./Ms	has been verified and is found to be true
and correct. He/She is a full time and r	regular student of our institution.
2. We have read the 'Guidelines' of t	he scheme and the Notification.
<ol><li>Certified that the candidate below India.</li></ol>	ngs to 'Minority Community' as notified by the Government of
4. He/She is eligible for receiving Minority Students' -2020-21.	the fellowship under 'Maulana Azad National Fellowship for
fellowship/scholarship/monetary assis or Ph.D. <b>OR</b> He/she was	she has neither received nor receiving any other tance from UGC or any other source for pursuing either M.Phil getting fellowship/scholarship under the scheme Ph.D, and the entire amount has been refunded by him/her.
	disburse the amount of fellowship directly to the account of and details of candidate being uploaded (Annexure-I & II) by al.
for Award of M.Phil/Ph.D Degree) Regu	on is complying with UGC (Minimum Standards and Procedure lations, 2016 and its amendments issued from time to time.
Signature of candidate:	Signature of Guide/
Date	Supervisor
Date:	Date:
	Seal:
Name:	Name:
	Designation:
Signature of Head of	Signature of Head
Department:	of Institution:
Date:	Date:
Seal:	Seal:
Name:	Name:
Designation:	Designation:

#### Annexure-I

#### University Grants Commission New Delhi-110002

VE	National Fellowship for Scheduled Ca (NFSC) RIFICATION FORM CUM JOINING REPORT FOR		PHOTOGRAPH OF CANDIDATE
	UNDER THE SCHEME	MVMDMG FEDDOWSHIF	
1	Name of Scholar/Candidate		
2	Date of Birth		
3	12 digit unique AADHAAR Number		
4	Whether belong to a notified Scheduled Caste (SC) category		
5	No. of UGC-NET e-Certificate for eligibility for Assistant Professor		
6	<b>NFSC-2020-21</b> Award letter Number and UGC-Ref.No.		
7	Year of passing of Master's Degree or equivalent examination		
8	Percentage of Marks in Master's Degree or equivalent examination		
9	Pursuing research for M.Phil or Ph.D		
10	Date of Admission for M.Phil/Ph.D		
11	Whether registered for M.Phil/Ph.D		
12	If already registered, give date of registration		
13	Whether pursuing research through full time regular mode		
14	Whether engaged in any type of employment (part-time/ad-hoc/full time or any other)		
15	Name of University where admitted for M.Phil/Ph.D		
16	Name of Institution where pursuing research		
17	Name, designation and official address of SUPERVISOR. (Only a full time regular teacher of concerned university/institution can act as a supervisor)		
18	Whether received (earlier) or receiving any other fellowship/ scholarship/ monetary assistance from UGC or any other source for pursuing M.Phil/Ph.D. (If yes, give details)		
19	I hereby declare that each and every fact given above is true and correct. I also authorise UGC to recover any excess/wrong payment from me.		<b>p.</b>
20	Signature of candidate with date		

#### University Grants Commission New Delhi-110002

### CERTIFICATE BY THE INSTITUTION

	rmation given in the VERIFICATION FORM CUM JOINING
	UNDER THE SCHEME (Annexure-I) as given by the candidate
Mr./Ms.	has been verified and is found to be true
and correct. He/She is a full time and r	regular student of our institution.
2. We have read the 'Guidelines' of the	he scheme and the Notification.
3. Certified that the candidate belon of India.	gs to Scheduled Caste category as notified by the Government
3. He/She is eligible for receiving the students-2020-21'	he fellowship under 'National Fellowship for Scheduled Caste
fellowship/scholarship/monetary assist or Ph.D. <b>OR</b> He/she was	she has neither received nor receiving any other tance from UGC or any other source for pursuing either M.Phil getting fellowship/scholarship under the scheme Ph.D, and the entire amount has been refunded by him/her.
7. We understand that UGC will d candidate on the basis of information a our institution on the scholarship porta	isburse the amount of fellowship directly to the account of and details of candidate being uploaded (Annexure-I & II) by d.
for Award of M.Phil/Ph.D Degree) Regul	on is complying with UGC (Minimum Standards and Procedure ations, 2016 and its amendments issued from time to time.
Signature of candidate:	Signature of Guide/
	Supervisor
Date:	
	Date:
Name:	Seal:
Name.	Name:
	Designation:
Signature of Head of	Signature of Head
Department:	of Institution:
Date:	Date:
Seal:	Seal:
Name:	Name:
Designation:	Designation:

#### **JOINING REPORT**

## AWARD OF M.Phil./ Ph.D./ M.Phil.+ Ph.D. IN SCIENCES, ENGINEERING AND TECHNOLOGY, HUMANITIES AND SOCIALSCIENCES

#### UNDER THE SCHEME

#### NATIONAL FELLOWSHIP & SCHOLARSHIP FOR HIGHER STUDIES OF ST STUDENTS

(Being implemented by Ministry of Tribal Affairs, Govt. of India)

Name of Awardee:					
This is to certify that	has joined	the Department of	for doing		
M.Phil./Ph.D./M.Phil.+Ph.D in th	ne University/Institute	on	. He/She will be		
provided with all necessary facilities during his/her tenure of award as mentioned in the award lette under the scheme National Fellowship & Scholarship for Higher Studies of ST Students. The term					
Also certified that the Fellow s	hall not accept/hold any en	noluments, paid or other	wise, or receive		
emoluments, salary, stipend etc	., from any other source dur	ing the tenure of the awa	rd.		
Signature of Awardee	Supervisor (Seal)	Head of Department			
		Nodal Officer/Desig the University/Colle			
Roll No:					
Aadhar No:					
Address:					
Name of the University/Institute					
Name of the Guide:					
Topic:					
Contact Number:					

#### Annexure-I

#### University Grants Commission New Delhi-110002

VE	National Fellowship for Other Backw (NFOBC) RIFICATION FORM CUM JOINING REPORT FOR UNDER THE SCHEME		PHOTOGRAPH OF CANDIDATE
1	Name of Scholar/Candidate		
2	Date of Birth		ANTINIA MARIAMANIA MARIAMANIA ANTINIA MARIAMANIA
3	12 digit unique AADHAAR Number		
4	Whether belong to a notified Other Backward Class (OBC)		
5	No. of UGC-NET e-Certificate for eligibility for Assistant Professor		
6	NFOBC-2020-21 Award letter Number and UGC-Ref.No.		
7	Year of passing of Master's Degree or equivalent examination		
8	Percentage of Marks in Master's Degree or equivalent examination		
9	Pursuing research for M.Phil or Ph.D		
10	Date of Admission for M.Phil/Ph.D		
11	Whether registered for M.Phil/Ph.D	10. 1. 10. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
12	If already registered, give date of registration		
13	Whether pursuing research through full time regular mode		
14	Whether engaged in any type of employment (part-time/ad-hoc/full time or any other)		
15	Name of University where admitted for M.Phil/Ph.D		
16	Name of Institution where pursuing research	A STATE OF THE STA	
17	Name, designation and official address of SUPERVISOR. (Only a full time regular teacher of concerned university/institution can act as a supervisor)		
18	Whether received (earlier) or receiving any other fellowship/ scholarship/ monetary assistance from UGC or any other source for pursuing M.Phil/Ph.D. (If yes, give details)		
19	I hereby declare that each and every fact given above is true and correct. I also authorise UGC to recover any excess/wrong payment from me.	N.	
20	Signature of candidate with date		

#### University Grants Commission New Delhi-110002

#### CERTIFICATE BY THE INSTITUTION

1. Certified that all the facts/inform	mation given in the VERIFICATION FORM CUM JOINING
	JNDER THE SCHEME (Annexure-I) as given by the candidate
	has been verified and is found to be true
and correct. He/She is a full time and re	
2. We have read the 'Guidelines' of th	e scheme and the Notification.
3. Certified that the candidate belo Government of India.	ongs to 'Other Backward Class' (OBC) as notified by the
4. He/She is eligible for receiving th Classes -2020-21'.	e fellowship under 'National Fellowship for Other Backward
fellowship/scholarship/monetary assists or Ph.D. <b>OR</b> He/she was	she has neither received nor receiving any other ance from UGC or any other source for pursuing either M.Phi getting fellowship/scholarship under the scheme h.D, and the entire amount has been refunded by him/her.
6. We understand that UGC will discandidate on the basis of information a our institution on the scholarship portal.	sburse the amount of fellowship directly to the account of nd details of candidate being uploaded (Annexure-I & II) by
<ol> <li>Certified that University/Institution for Award of M.Phil/Ph.D Degree) Regula</li> <li>AISHE code of our University/Institution</li> </ol>	n is complying with UGC (Minimum Standards and Procedure ations, 2016 and its amendments issued from time to time.  ution is
Signature of candidate:	Signature of Guide/
	Supervisor
Date:	
	Date: Seal:
Name:	Name:
	Designation:
Signature of Head of	Signature of Head
Department:	of Institution:
Date:	Date:
Seal:	Seal:
Name:	Name:
Designation:	Designation:

# PROFORMA FOR THE MASTER ENTRY IN THE UGC DBT-MODE FOR THE SCHEME OF \_\_\_\_\_

ser ,

Year of Selection         :           University / UGC Ref ID         :           Student Name         :           Account No         :           IFSC         :           Bank & Branch Name         :           Date of Birth         :           Gender         :           Stream         :           Present Address         :           Domicile State, Dist, Urban/Rural and local village/town name         :           PIN         :           Father Name         :           Mother Name         :           Divyang (PH)         :           Category         :           ID Proof         :           Adhar / Student ID / Passport / Driving License / Voter ID           Mobile         :           Email         :           Date of Joining to the Course / Voter ID           Mobile         :           Email         :           Date of Fellowship Date / Adhar         :           Adafar         :           JRF/ SRF/ others         :           Name of the Course / IRA         :           JRF/ SRF/ others         :           Name of the Course / IRA	Scheme	T :	
Student Name  Account No  IFSC  Bank & Branch Name  Date of Birth  Gender  Stream  Present Address  Domicile State, Dist, Urban/Rural and local village/town name  PIN  father Name  Mother Name  Divyang (PH)  Category  ID Proof  Addhar / Student ID / Passport / Driving License / Voter ID  Mobile  Email  Date of Joining to the Course Email (DD-MMM-YYYY)  Addhar  JRF/ SRF/ others  Name of the Course  Name of the Course  Research Topic  Research Summary  Professor's Name  Professor's Mobile No	Year of Selection	+-	
Account No :	University / UGC Ref ID	:	
IFSC  Bank & Branch Name  Conder  Stream  Present Address  Domicile State, Dist, Urban/Rural and local village/town name  PIN  Father Name  Mother Name  Divyang (PH)  Category  ID Proof	Student Name	+	
Bank & Branch Name : Date of Birth : Stream : Stream : Stream : Domicile State, Dist, Urban/Rural and local village/town name : Mother Name : NO / YES : NO / YES : NO / YES : Mobile :	Account No	<del> </del>	
Bank & Branch Name : Date of Birth : Stream : Stream : Domicile State, Dist, Urban/Rural and local village/town name : Mother Na	IFSC	:	
Gender : :		1:	
Gender : Stream : Str	Date of Birth	+-	
Stream : :	Gender		
Present Address : : : : : : : : : : : : : : : : : :		+	
Domicile State, Dist, Urban/Rural and local village/town name  PIN :  Father Name :  Mother Name :  Divyang (PH) : NO / YES  Category : Gen/SC/ST/OBC/Other  ID Proof : Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile :  Email :  Date of Joining to the Course : (DD-MMM-YYYY)  Course End Date : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  Aadhar :  JRF/ SRF/ others :  Name of the Course : M.Phil. / Ph.D. / Others  HRA : Day Scholar / Hostel Resident  Research Topic :  Research Summary :  Professor's Name :		+-	
Urban/Rural and local village/town name  PIN : Father Name : Mother Name : Divyang (PH) : NO / YES  Category : Gen/SC/ST/OBC/Other  ID Proof : Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile : Email : Date of Joining to the Course : (DD-MMM-YYYY) Course End Date : (DD-MMM-YYYY) End of Fellowship Date : (DD-MMM-YYYY) Aadhar : JRF/ SRF/ others : Name of the Course : M.Phil. / Ph.D. / Others HRA : Day Scholar / Hostel Resident Research Topic : Research Summary : Professor's Name : : .	Trosont ridaress	•	·
PIN : Father Name : Mother Name : NO / YES  Category : Gen/SC/ST/OBC/Other  ID Proof : Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile : Date of Joining to the Course : (DD-MMM-YYYY)  Course End Date : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  Aadhar : JRF/ SRF/ others : M.Phil. / Ph.D. / Others  HRA : Day Scholar / Hostel Resident  Research Topic : Professor's Name :	Urban/Rural and local	:	
Father Name : : : : : : : : : : : : : : : : : : :			
Mother Name  Divyang (PH)  Category  Category  Category  Caden/SC/ST/OBC/Other  ID Proof  Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile  Email  Date of Joining to the Course  Course End Date  Course End Date  Course End Date  Course End Of Fellowship Date  Aadhar  JRF/ SRF/ others  Name of the Course  M.Phil. / Ph.D. / Others  HRA  Research Topic  Research Summary  Professor's Name  Professor's Mobile No   NO / YES  NOM / YES  Adhar  Description  Andhar / Voter ID  Andhar / YYYY)  Course End Date  CDD-MMM-YYYY)  Adhar / DD-MMM-YYYY)  Adhar / DD-MMM-YYYY)  Adhar / DD-MMM-YYYY)  Adhar / DD-MMM-YYYY)  Professor's Name  CDD-MMM-YYYY)  Andhar / DD-MMM-YYYY)  Andhar / DD-MMM-YYYY  Andhar /		:	
Divyang (PH) : NO / YES  Category : Gen/SC/ST/OBC/Other  ID Proof : Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile : Email : Date of Joining to the Course : (DD-MMM-YYYY)  Course End Date : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  Aadhar : JRF/ SRF/ others : M.Phil. / Ph.D. / Others  HRA : Day Scholar / Hostel Resident  Research Topic : Research Summary : Professor's Name :		:	
Category : Gen/SC/ST/OBC/Other  ID Proof : Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile : Email : Date of Joining to the Course : (DD-MMM-YYYY)  Course End Date : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  Aadhar : (DD-MMM-YYYY)  Aadhar : IN Phil. / Ph.D. / Others  HRA : Day Scholar / Hostel Resident  Research Topic : Professor's Name :	Mother Name	:	
ID Proof  Aadhar / Student ID / Passport / Driving License / Voter ID  Mobile  Email  Date of Joining to the Course : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  End of Fellowship Date : (DD-MMM-YYYY)  Aadhar  JRF/ SRF/ others : M.Phil. / Ph.D. / Others  HRA : Day Scholar / Hostel Resident  Research Topic : Research Summary  Professor's Name :	Divyang (PH)	:	NO / YES
Mobile :	Category	:	Gen/SC/ST/OBC/Other
Email : Date of Joining to the Course : (DD-MMM-YYYY) Course End Date : (DD-MMM-YYYY) End of Fellowship Date : (DD-MMM-YYYY) Aadhar : :  JRF/ SRF/ others : :  Name of the Course : M.Phil. / Ph.D. / Others HRA : Day Scholar / Hostel Resident Research Topic : :  Research Summary : :  Professor's Name : :	ID Proof	:	
Date of Joining to the Course Course End Date Course Course End Date Course Course End Date Course C	Mobile	:	
Course End Date : (DD-MMM-YYYY) End of Fellowship Date : (DD-MMM-YYYY) Aadhar : :  JRF/ SRF/ others : :  Name of the Course : M.Phil. / Ph.D. / Others HRA : Day Scholar / Hostel Resident Research Topic : :  Research Summary : :  Professor's Name : :	Email	:	
End of Fellowship Date : (DD-MMM-YYYY)  Aadhar : : : : : : : : : : : : : : : : : : :		1:	(DD-MMM-YYYY)
Aadhar :		<u> </u> :	
JRF/ SRF/ others : M.Phil. / Ph.D. / Others HRA : Day Scholar / Hostel Resident Research Topic : Research Summary : Professor's Name :		:	(DD-MMM-YYYY)
Name of the Course : M.Phil. / Ph.D. / Others HRA : Day Scholar / Hostel Resident Research Topic :  Research Summary :  Professor's Name :		<u>                                     </u>	
HRA : Day Scholar / Hostel Resident Research Topic :  Research Summary :  Professor's Name :		ļ	M Phil / Ph D / Others
Research Topic : Research Summary : Professor's Name :		<del></del> -	
Professor's Name : :		+	Day Scholar / Hoster Resident
Professor's Mobile No :	Research Summary	:	
	Professor's Name	:	
Professor's email Id :	Professor's Mobile No	:	
	Professor's email Id	:	

	Reg.No	Course_	Sub	ject
	Sch/Dept/Center		under	the
supervision of Prof./D	Or.	hereby	declare that	the
above information prov				
Signature Research Scholar Date:	<b>Signature</b> Guide /Supervisi Date:		Signature HOD/Dea Date:	13
Check List				
<ul> <li>Copy of Award</li> <li>Photocopy of So</li> <li>Photocopy of Bo</li> <li>Caste Certificate</li> <li>Photocopy of A</li> <li>Birth Certificate</li> <li>Hostel allotmen</li> <li>PG certificates</li> <li>If availing Uni</li> </ul>	ourse Admit Card letter (laminated) emester Registration and Stude ank Account pass Book front p e adhar / Passport / Voter ID / D e/SSC Pass certificate t letter (if Hosteller) / Non-Boa versity fellowship (Non-Net) et and refund the amount if a	age Driving License arding certificate  first need to so		
	*	**************************************		
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	Scholarship Name:	(D	BT mode)
	CONTIN	UATION CERTIFICATE	
	From /	To ** ** ** **	
	Registration Number		
	Award No	:	
	Name of the Scholar	:	
	School / Department / Center	:	
	Name of the Research Supervisor	:	
lt	is certified that he / she has continuo	ously working for the above said p	period.
		<b>Signature :</b> Guide / Supervisor	Signature : HoD / Dean
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	H.R.A. CERTIFICATE	
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Cimanton	6.	<b></b>
Signature :	Signature:	Signature:
<b>Signature :</b> Research Scholar Date :	<b>Signature :</b> Guide / Supervisor Date :	<b>Signature :</b> HoD / Dean Date :
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CONT	INGENCY CERTIFI	CATE
From From	To	
Registration Number		
Award No		
Name of the Scholar		
School / Department / Center	:	
Name of the Research Supervisor	- :	
research seriolar	Guide / Supervisor	HoD / Dean
<b>Signature :</b> Research Scholar	Signature:	Signature:
	Guide / Supervisor	HoD / Dean
Date :	Date:	HoD / Dean Date :
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Date : Check List : Photocopy of Valid Bills for o	Date: Semester Registration a claim Contingency Gran	Date : and Identity Card at
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Date:  Check List: Photocopy of Valid Bills for or Valid Bills for or Valid Bills for or Valid Bills for or Valid Bills for claim Continger	Date: Semester Registration a claim Contingency Grand OFFICE USE ONLY Registration and Studen	Date:  and Identity Card  at  To Date  To Date  Attendant of expenditure.
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Date:  Check List: Photocopy of Valid Bills for or Valid Bills for or Valid Bills for or Valid Bills for or Valid Semester  O Photocopy of Valid Semester O Valid Bills for claim Continger  Forwarded / Not Forwarded (	Date: Semester Registration acclaim Contingency Grant OR OFFICE USE ONLY Registration and Studency Grant along with Sta	Date:  and Identity Card  To Date  It Identity Card  atement of expenditure.  Section Officer
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Date:  Check List: Photocopy of Valid Bills for or Valid Bills for or Valid Bills for or Check List:  Existing Sanction: From Date Photocopy of valid Semester Valid Bills for claim Continger  Forwarded / Not Forwarded (  Dealing Assistant	Date:  Semester Registration a claim Contingency Grant Studency Grant along with State Portal on	Date:  and Identity Card  To Date  It Identity Card  atement of expenditure.  Section Officer

#### **NEW FELLOW JOINING FORM**

Fello	wship Type*	Fellow Designation		

#### **Result Details**

Exam Month/Interview Month*	Exam Year/Interview Year*	Roll Number/ACK Number*	Date of Joining*

## Validate Fellow Personal Information

Roll No*	Exam Year*	Category*	Title*
First Name*	Middle Name	Last Name	Gender*
Date Of Birth*	Aadhar Type*	PAN No	
•			
Present Address*	Present State*	Present City*	Present Pin Code*
Permanent Address*	Permanent State*	Permanent City*	Permanent Pin Code*
Phone No 1*	Email ID 1*	Phone No 2	Email ID 2
Bank Name*	Account No.*	IFSC Code*	

### **Academic Details**

Highest Degree Obtained*	Year of Passing*		· ·
		·	

## **Research Details**

Fellowship Type*	Joined At*	Joined Designation*	Tenure in Month*
Date Of Joining*	Present Designation*	Date Of Termination*	Sanction tenure upto (DOR)*
Fellowship Status*	Institute Code*	Institute Name*	Institute Address 1*
LIVE	09/0414	UNIVERSITY OF HYDERABAD	PROF. CR RAO ROAD, GACHIBOWLI
Institute Address 2	State*	City*	Pin Code*
Department Joined*	Area of Research*	Subject*	Guide Name*
Guide Department*	Exam Date/Interview D	ate*	Stipend Amount*

#### **Documents for Uploading:**

File Size should not exceed 1MB Only PDF File Allowed.

If the PDF file you trying to upload conatins any space or number or special characters rename it to only alphabets ant try to upload.

- Duly filled Joining/Undertaking & Attestation forms\*(application, joining, undertaking and attestation all in one file and not more than  $1\,\mathrm{mb}$ )
- Passport sized color photograph of the candidate\*
- -Document in Support of Date Of Birth\*
- Caste Certificate (if availed the benefit)
- PwD Certificate (if availed the benefit
- EWS (Economically Weaker Section) Certificate (if availed the benefit)
- JRF-NET Certificate issued by Exam Unit of CSIR\*
- Graduation Mark Sheet\*
- Postgraduate Mark Sheet\*
- Offer letter issued by CSIR-HRDG
- Integrated PhD/PhD registration documents for activation of JRF-NET (if qualified candidate is holding the Bachelor degree in science/engineering)
- Upload Aadhar Card/ Aadhar ACK Number
- Copy of Bank Passbook (Bank passbook, cheque and Annexures 1 & 2 all shoul be in one file)

The above mention documents are required both hard as well as soft copy (in PDF format). Scan copies need to be scan separately.



## Office of the Dean, Students' Welfare Fellowships and Scholarships Section

UNIVERSITY OF HYDERABAD Prof. C.R. Rao Road, Gachibowli, Hyderabad, TELANGANA – 500 046

No. UH/DSW/FSS/2022/

08 March 2022

#### ATTENDANCE CERTIFICATE

It is hereby certified that the following Research Fellow(s)/Associate(s) whose attendance authentication is done online has/have regularly attended the office to pursue his/her/their research work and have availed leaves with stipend that was applicable to him/her/them in accordance to Leave Rules of the CSIR fellowship during the month of the attendance certification i.e. <u>From</u> to

SI. No.	File No.	Full Name of Fellow	HRA
1.			

Signature Name of the Research Supervisor Date:

Deputy Dean, Students' Welfare Fellowships & Scholarships Section

#### UNIVERSITY GRANTS COMMISSION SELECTION & AWARDS BUREAU BAHADURSHAH ZAFAR MARG NEW DELHI- 110 002.

THREE MEMBER ASSESSMENT COMMITTEE REPORT FOR UPGRADATION FROM JRF TO SRF UNDER THE SCHEME OF JRF IN SCIENCES, HUMANITIES AND SOCIAL SCIENCES.

Assessment for up gradatio	n of Mr./Mrs		JRF working at	the Department of
	University /	Institution / College	••••	on completion
of two years on date				
CONSTITUTION OF TH (Name and Designation) (C	IE COMMITTEE	T OF CONCERNED SUBJ	ECT)	
2.				
3.				
Date of Joining:				
Ph.D. registration No.:				
Date of Meeting:				
Time:				
VENUE OF ASSESSMEN	NT/INTERVIEW:			
The Committee assessed th follows	e progress of the candida	ate through their presentation	on followed by intervi-	ew and recommended as
(Satisfactory/Good/Very Go	ood/Excellent) (Strike o	ut whichever is not applicat	ole)	
In view of the outstanding whis/her credit the committee			also the fact that he/sl	he has published work to
Mr./Mrs./Ms	may	be upgraded from JRF to S	SRF w.e.f	
Signature Date Name of the Supervisor	Signature Name Head of Department (Seal)	Signature Name Registrar/Director/Princip (Seal of University/Institu		
Signature out side Expert Date Name of the Expert				

Human Resource Development Group (HRDG) Council of Scientific & Industrial Research Grant-in-aid Claim Bill

Date:

Total number

Part-B: Individual Release of Grants

Name of the host institute:

specify (Licence fee/hostel fee Any other deductions, please of without pay Amount deducted on account d absent (without ary remaine the benefici pay) during the month of days Gross amount Any other amount payable Honorarium нкъ Period of Payment | Grant claimed Fellowship From of the Benefici Aadhar Number Code where the beneficiar has the bank with IFSC of bank y ha his/her account Bank account number of the seeded with the Aadhar Number beneficiary tenure upto & CSIR-HRDG/CSIR Laboratory OM No. with Sanctioned amount of pay/fellows hip/honorari um, etc. Monthly HRDG(CSIR) sanction letter no./file no. Name of the beneficiary r awardee and the ρ fellow)/othe and t position held him/her (Research Sno

Net amount payable

Certified that the Research Fellow has regularly attended the office to pursue his/her research work and availed.......days leave during the month (Please see leave rule available on HRDG-CSIR website www.csirhrdg.res.in). Name and Signature of Registrar/Principal/Administrative Officer/Finance & Accounts Officer Name and Signature of Registrar/Principal/Administrative Officer/Finance & Accounts Officer

Important: Separate claim bills for Fellowships & Associateships/EMR Projects/SSB Awards/YSA Awards/Travel Grants/Emeritus Scientist/Research Fellows in EMR funded projects, etc.

## INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH

## Grant-in-Aid Bill

Received a sum of	(	)
by cheque/demand draft No	dated	
in favour of	drawn on Canara	Bank,
ICSSR, Aruna Asaf Ali Marg, New Delhi-110 entitled	0067 being the grant-in-aid of the	project
towards the instalment of the total		)
sanctioned vide letter No		
of the Indian Council of Social Science Re		

Signature Project Director

Please affix Revenue Stamp

- a. Certified that the Institution accepts all the terms and conditions governing the above grant and that it lends itself to abide by these.
- b. Certified that the Institution/Organization was/has not been sanctioned any grant-in-aid for the same purpose by any other source of the Central Government during the period to which the grant relates.
- c. It should be countersigned by the Administrative Head of the Institution / University.

Signature of the Head (Affiliating Institute/University) Designation with Seal



## OFFICE OF POST DOCTORAL AFFAIRS (OPDA)

## Format for the Issue of ID Cards for Post-Doctoral Fellows

	1 Office 100 and			
1. Name:				and experient an unable to the result of the
2. Schome & Denartment:				-
Sanction Order & Date (copy to be provided)				
<ul><li>4. Date of Joining (copy of Joining Report to be provided)</li><li>5. Tenure of the Fellowship:</li></ul>				Photo
Mode of payment of Fellowship:				
☐ University of Hyderabad, ☐ Canara Bank,				* .
□ Direct cr	redit to Candidate	Account, 🛚 Direct Be	enefit transfer	
Contact	Residential Address Phone No		Email	
details:				
D	Date of Birth	Blood Group		AADHAR card No.
Personal details	Date of Billi	D.000		
Details of F	ees Paid: Rs. 200	/= Date		
Signature of Post				st-Doctoral Fellow
Date:			:	
Signature (with date) (Head of Department / Centre / Dean				Office seal
(Head of L	epartment / Centi	C / Dour		
Signature				Office seal
	in-charge, OPDA			Office 3car
Signature				Office seal
Public Rel	lations Officer (PR	O)		
		ions to issue the ID Ca	rd	
Orders of	the authorized offi	icer to issue the ID Ca		
Date:				Deputy Registrar (A & E)
ID Card pri	nted on	by		