



IoE-Directorate  
प्रतिष्ठित संस्थान-निदेशालय  
University of Hyderabad  
हैदराबाद विश्वविद्यालय  
Gachibowli, Hyderabad – 500046  
गचीबोवली, हैदराबाद - ५०००४६



## **IoE - PDRF APPLICATION FORM**

**NAME OF DEPARTMENT / CENTRE : HUMANITIES / .....**

{Please fill the application form and attach all required documents and submit by email to the respective email address of the Department / Centre concerned, as given in the notification, by **05:00 PM IST 08-09-2023**.

*{This form along with annexures may be converted into a single PDF file and sent by email.}*

| <b>APPLICANT'S PERSONAL DETAILS</b>   |   |
|---|---|
| NAME  |   |
| GENDER  |   |
| DATE OF BIRTH & AGE   |   |
| NATIONALITY / SOCIAL STATUS / CATEGORY  |   |
| PERMANENT ADDRESS   |   |
| ADDRESS FOR CORRESPONDENCE  |   |
| EMAIL ADDRESS & PHONE / MOBILE  |   |
| <b>APPLICANT'S PROFESSIONAL DETAILS</b>   |   |
| DETAILS OF QUALIFICATIONS (IN REVERSE CRONOLOGY). INCLUDE NAME OF THE DEGREE, YEAR OF PASSING, CLASS / DIVISION OBTAINED AND NAME OF THE UNIVERSITY | COPIES OF CERTIFICATES ARE TO BE ATTACHED AS ANNEXURE |

|   |   |
|---|---|
| SUMMARY OF Ph.D. WORK<br>(SYNOPSIS OF THESIS)   | ATTACH AS ANNEXURE  |
| AREA(S) OF SPECIALIZATION   |   |
| DETAILED CV WITH PREVIOUS POST<br>DOCTORAL EXPERIENCE, IF ANY,<br>LIST OF PUBLICATIONS, IF ANY, AND<br>NAMES OF THREE REFEREES<br>(ENCLOSE A MAXIMUM OF 3 REPRINTS) | ATTACH AS ANNEXURE  |
| SUMMARY OF YOUR RESEARCH<br>EXPERIENCE AND SKILL SETS   | ATTACH AS ANNEXURE  |
| <b>APPLICANT'S PROPOSED RESEARCH ACTIVITY</b>   |   |
| DETAILS OF RESEARCH PROPOSAL WITH<br>CLEAR OBJECTIVES, DELIVERABLES,<br>MILESTONES, ETC   | <p style="text-align: center;"><b>ATTACH AS ANNEXURE</b></p> <p>PROJECT PROPOSAL FORMAT: (ABOUT 2500 WORDS)</p> <ul style="list-style-type: none"> <li>• TITLE OF THE RESEARCH PROJECT</li> <li>• BRIEF STATEMENT OF THE PROJECT</li> <li>• REVIEW OF EXISTING WORK IN THE AREA</li> <li>• SIGNIFICANCE OF THE PROPOSED PROJECT</li> <li>• DETAILED STATEMENT OF THE PROJECT</li> <li>• METHODOLOGY &amp; PLAN OF ACTION</li> <li>• EXPECTED OUTCOME, SUCH AS NEW THEORIES /<br/>ARGUMENTS / PUBLISHING QUALITY PAPERS /<br/>ARTICLES, BOOK / BOOK CHAPTERS, AND OTHERS</li> <li>• SELECT BIBLIOGRAPHY</li> </ul> |
| NAME AND AFFILIATION OF THE<br>FACULTY MEMBER WHO HAS AGREED TO<br>MENTOR THE APPLICANT   | ATTACH ENDORSEMENT LETTER WITH<br>DIGITAL SIGNATURE / CONFIRMATION EMAIL<br>FROM THE MENTOR   |

I STATE THAT THE APPLICATION IS COMPLETE IN ALL RESPECTS AND ALL INFORMATION IS CORRECT. I UNDERTSAND THAT IF ANY OF THE INFORMATION PROVIDED IS FOUND TO BE FALSE, THE FELLOWSHIP WILL BE TERMINATED IMMEDIATELY, AND THE APPLICANT WILL BE LIABLE TO REFUND THE FELLOWSHIP RECEIVED.

**Name and Signature of the Applicant:**

**Signature / Date**