



**COUNCIL OF SCIENTIFIC AND INDUSTRIAL RESEARCH
HUMAN RESOURCE DEVELOPMENT GROUP
(EXTRAMURAL RESEARCH DIVISION)**

**UNDERTAKING BY A RESEARCH FELLOW/ ASSOCIATE ON ACCEPTANCE
OF THE AWARD OF RESEARCH FELLOWSHIP/ ASSOCIATESHIP**

I Son/Daughter/Wife of Shri residing at
..... have been awarded the Junior/senior
Research Fellowship/research Associateship of the Council of Scientific & Industrial Research (hereinafter called
Council). I accept the award and undertake that:

- I. During the entire tenure of the Fellowship/Associateship I shall abide by the rules and regulations of the Council. Any change in rules and regulations by the Council in future will be applicable to me.
- II. As a recipient of the Council's Fellowship/Associateship I shall also abide by the rules, discipline of the institution where I have been given the facility of work.
- III. I shall devote full time to research during the tenure of Fellowship/Associateship except as provided in the rules.
- IV. I shall obtain the approval of the Council before accepting any award or allowance, if offered to me during the tenure of Fellowship/Associateship.
- V. I shall prepare the progress report of my work of at the end of each year and communicate it to the Council through the Guide / Supervisor / Faculty Member.
- VI. I shall send two copies of a detailed consolidated report of research work through the Supervisor on termination of the Fellowship / Associateship.
- VII. I also hereby declare that if the results of research are such that can be exploited commercially by taking a patent or otherwise commercial exploitation and patent rights will rest exclusively with the Council (*The clause is applicable for the Guide also*).
- VIII. I have gone through CSIR Terms & Conditions & have clearly understood that the fellowship is for a fixed period / tenure of 2/3/4 Years for JRF/SRF i.e. a total of 5 Years for JRF+SRF and for Research Associates, initially for a period of one year, extendable on yearly basis at the discretion of CSIR upto a maximum of five years.
- IX. **I further understand clearly that I shall have no claim whatsoever for regular / permanent absorption on expiry of Fellowship / Associateship.**

**PHOTOGRAPH
DULY
ATTESTED BY
SUPERVISOR TO
BE AFFIXED.**

Signature of the Research Fellow / Associate

**Countersigned by the Supervisor / Senior Faculty Member With
Seal & Date**

I report myself on duty as Junior / Senior Research Fellow / Research Associate on the Forenoon /
Afternoon of (Date) at(Name of
Department) of(Name of University /
Institute / College).

Signature of the Research Fellow / Associate

**Signature of the Head of the Deptt. /
Supervisor / Senior Faculty Member
With Seal & Date**

DELETE WHICHEVER IS NOT APPLICABLE

P.T.O.

FOR UNMARRIED

Ido hereby solemnly declare that so long as I remain a recipient of the Council's Fellowship / Associateship, I will not marry a second time, while my first wife is alive, save with the permission of the Competent Authority.

Signature of the Research Fellow / Associate

FOR MARRIED

Ido hereby solemnly declare that I have not more than one living wife and that so long as I remain & recipient of the Council's Fellowship / Associateship. I will not marry a second time while my first wife is alive, save with the permission of the Competent Authority.

Signature of the Research Fellow / Associate

FOR FEMALE

I do solemnly declare that I have not or will not marry any person who has a wife living without first obtaining the permission of the Competent Authority.

Signature of the Research Fellow / Associate

FORM OF OATH OF ALLEGIANCE

“ Ido swear that I will be faithful and bear true allegiance to India and to the Constitution of India established and that I will loyally carry out the duties. So help me God.”

Signature of the Research Fellow / Associate

Roll No. _____
Date of Exam _____

ATTESTATION

(Name of the Candidate)

I recommend the candidate for the award of Junior Research Fellowship and undertake to guide him/her on:

(Please indicate topic)

For the duration of fellowship in case he/she is awarded the Fellowship by CSIR. Necessary facilities for research on the problem are available in the Institution. I also certify that I am authorized to guide Research Fellows under the University Rules. I have personally verified the concern degree, marks sheets and other relevant testimonials, which have been enclosed herewith by the candidates with reference to their original.

Signature Name and
Designation of Guide with
Name of the Univ./Instt.

Date _____

Necessary facilities are available and will be provided to the applicant for research during the tenure of Fellowship in case of his/her selection. The candidate will be allowed to join the Fellowship immediately on receiving the award and registered in the University for higher degree.

Signature & Name of Head of
the Department/Institution
with seal

Date _____

1. Topic of Research:

2. Board/Area of Research:

<u>Subject</u>	<u>Code No.</u>	<u>Subject</u>	<u>Code No.</u>
Physics	01	Biophysics	11
Pure Mathematics	02	Medical & Allied Sciences	12
Applied Mathematics	03	Botany	13
Statistics & Operational Res.	04	Zoology	14
Analytical Chemistry	05	Geology	15
Applied/Industrial Chem.	06	Geophysics	16
Inorganic Chemistry	07	Geochemistry	17
Physical Chemistry	08	Meteorology & Oceanography	18
Organic Chemistry	09	Engineering & Tech.	19
Biochemistry	10	Others	20

**Subject Code number may be ticked/encircled.

3. The proposed work indicating overall aim of the research and how it is to be progressed may be described briefly (in the space provided below)