

**Verification Proforma to be filled by the candidate himself/herself duly verified by the Registrar/Principal/Director of the concerned Research University/College/Institute**

Paste Photograph

(attestation across photograph)

**PERSONAL DETAILS :**

1. Registration ID (available against the name in the result)\_\_\_\_\_
2. Name : \_\_\_\_\_
3. Gender : (M/F/Transgender) Date of Birth :
4. Age as on date of application \_\_\_Year\_\_Month\_\_Days
5. Caste Category (please tick) Gen./SC/ST/OBC/PwD
6. Present Address \_\_\_\_\_
7. E-mail \_\_\_\_\_
8. Contact No. \_\_\_\_\_
9. Aadhar Card No.(if available) \_\_\_\_\_
10. Qualifications as per record : \*(Strike out whichever is not applicable)
  - **School level (Mandatory for scholarships)**
    - % of marks obtained in XII class : \_\_\_\_\_ Passing Year \_\_\_\_\_
    - Marks Obtained \_\_\_\_\_ Out of ( #total marks) \_\_\_\_\_ Division \_\_\_\_\_ CGPA \_\_\_\_\_ Equivalent- \_\_\_\_\_%
    - In case of CGPA: Max.CGPA : \_\_\_\_\_ CGPA obtained : \_\_\_\_\_ Equivalent - \_\_\_\_\_%
  - **Undergraduation level**
    - % of marks at UG level : Exam \_\_\_\_\_ Passing Year \_\_\_\_\_ Divison \_\_\_\_\_
    - Marks Obtained \_\_\_\_\_ Out of ( #total marks) \_\_\_\_\_ Division \_\_\_\_\_ CGPA \_\_\_\_\_ Equivalent- \_\_\_\_\_%
    - In case of CGPA: Max.CGPA : \_\_\_\_\_ CGPA obtained : \_\_\_\_\_ Equivalent - \_\_\_\_\_%
  - **Postgraduation level**
    - % of marks at UG level : Exam \_\_\_\_\_ Passing Year \_\_\_\_\_ Divison \_\_\_\_\_
    - Marks Obtained \_\_\_\_\_ Out of ( #total marks) \_\_\_\_\_ Division \_\_\_\_\_ CGPA \_\_\_\_\_ Equivalent- \_\_\_\_\_%
    - In case of CGPA: Max.CGPA : \_\_\_\_\_ CGPA obtained : \_\_\_\_\_ Equivalent - \_\_\_\_\_%
  - **Registration details :**
    - Name of University/ Institute/ College \_\_\_\_\_
    - Nature of the course of study : \_\_\_\_\_
    - Enrolment no./Registration no. given by University/ Institute/ College: \_\_\_\_\_
    - Date of enrolment/ registration : \_\_\_\_\_
    - Name of Supervisor : \_\_\_\_\_
    - Department : \_\_\_\_\_
    - Title of research : \_(in short) \_\_\_\_\_

## INSTITUTION/ COURSE DETAILS

- The University /Institute/ College is recognized u/s 2(f) & 12(b) of the UGC Act, 1956.
- The University /Institute/ College is a Deemed University declared under section 3 of the UGC Act, 1956 and eligible to receive grant in aid from UGC (Yes/No)
- The University /Institute/ College is funded by Central/State Government.
- The University /Institute/ College is included under the list of institutions declared as Institute of national Importance. (Please clarify) (Yes/No)
- The scholar is pursuing the course : \_\_\_\_\_ which is a general/ technical/ medical/ professional/ para-medical course. The tenure of the course is \_\_\_\_\_ years (indicate the actual number of years permissible as per University rules).

## OTHER DETAILS :

- Is the scholars already availing any fellowship/ scholarship at present :   
If yes, the name of the scheme with complete details : \_\_\_\_\_
- You are employed on regular or temporary basis ? (Yes/No)  
If yes, nature of employment : \_\_\_\_\_
- Any other information that may be relevant to the credentials of the scholar : (max. words 500)

## DECLARATION :

I declare that the particulars given in the above form are correct and true to the best of my knowledge and belief.

Signature of the awardee (with date)

I have verified the above information provided above as per records available in the institution and have found the same to be in order. The signature of the awardee is also verified above.

Registrar/Principal /Director with official seal

***\*Incomplete proforma will not be acceptable. The awardees will be able to download the award letter only after the uploaded documents are verified by UGC. If any discrepancy is found in the records, an email may be sent to [ugcfellowships@gmail.com](mailto:ugcfellowships@gmail.com) with complete details of the candidate.***