



GOA UNIVERSITY
Taleigao Plateau, Goa

APPLICATION FOR AWARD OF RESEARCH STUDENTSHIP

1. Name of the Research Scholar : _____
2. Address : _____
3. Contact No : _____
4. Email Id : _____
5. Department : _____
6. Date of Registration : _____
7. Date of Confirmation : _____
8. Name of the Guide : _____
9. Title of the Thesis : _____
10. Whether employed : Yes/No (if yes, give details) _____

11. Academic Record:

Name of Examination	Year of Passing	Marks Obtained	Percentage	Class
Degree				
Post Graduation				
Other Academic Achievements				

12. Whether the applicant is in receipt : Yes/No (if yes, give details) _____
of any other Scholarship etc

Declaration cum Undertaking

I hereby declare that the information provided above is true. If awarded the Studentship, I undertake to refund the amount received under this Scheme if my Ph.D. Programme of study is terminated without completion.

Signature of the Applicant with date

Recommendation and Signature of the Guide: _____

Recommendation
and Signature of Vice-Dean Research/ Head of the Department: _____