

APPLICATION FORM

Space for recent passport
size photograph

1. Full name (IN BLOCK LETTERS)
(Mr. / Mrs. / Miss)

2. Male () Female ()

3. Contact details:-

i. Tel:

ii. Fax:

iii. Email:

vi. Postal address:

4. Permanent home address (IN BLOCK LETTERS)

5. Date of birth _____ Nationality _____

6. Country of residence _____

7. Passport No. _____

i. Date of issue _____ ii. Date of expiry _____

iii. Place of issue _____

Details of Father / Guardian

Name:

Relation (F/G):

Occupation:

Nationality:

Address of permanent residence of Father / Guardian

9. Knowledge of proficiency in English

Written	Good ()	Fair ()	Poor ()
Spoken	Good ()	Fair ()	Poor ()

Specify level of examination passed in English and grades obtained.

10. Knowledge of any other language _____

Written	Good ()	Fair ()	Poor ()
Spoken	Good ()	Fair ()	Poor ()
Understand	Good ()	Fair ()	Poor ()

11. Give details, if any

- (a) Proficiency acquired in games, sports & athletics; and
(b) Part taken in other extra-curricular or social activities

12. State in Order of preference the courses which you would like to study in India. (Candidate should be very specific and Name of the courses etc. clear about his / her course of study, which he / she wishes to pursue in India. Scholarships are not available for multiple studies).

- 1.
- 2.
- 3.

13. State in order of preference the Universities / Institutes in India in which you seek admission* (this column must be filled in by the candidate)

- 1.
- 2.
- 3.

*Please refer to "Universities Handbook of India" available with the Indian Diplomatic Mission in your country or go to University Grants Commission website at <http://www.ugc.ac.in> Please note that ICCR does not give scholarship for courses in private / deemed universities.

There is no guarantee for admission in your choice of University / Institution. In case of non-availability of a particular course in a particular Institution, the Council will forward the application to other Universities/Institutions where such courses are available.

The Council would try to accommodate the candidates as per their choice of course/institute but they must be prepared to join any other institute if they are not given admission in institution(s) of their choices.

Give below the names of two persons who have agreed to testify from their personal knowledge to your character. (they must not be related to you and should have direct knowledge of your academic pursuits and attach recommendation letters / character certificates signed by them).

(a) Name _____
Status _____
Address _____

(b) Name _____
Status _____
Address _____

16. Name (s), address (es) and telephone number (s) of close relative (s) or friends, if any, in India.
(Indicate also relationship)

17. Have you travelled or lived in India in the past? If so, mention places visited and dates of such visits.

18. Have you ever availed of ICCR Scholarship earlier, if so please give full details.

- (i) Year of Scholarship
- (ii) Name of Course
- (iii) Name of the Institute / University
- (iv) Total duration of stay in India on scholarship

19. Any general remarks which you would like to offer (if the space is not sufficient, attach a separate sheet and sign the same).

Date

Place

Signature of Applicant

I hereby declare that the particulars given above are true to the best of my knowledge and belief, that I have understood the terms and conditions of the Scholarship Scheme and that I undertake to return to my country after completion of my studies in India.

Signature of Applicant

Give below the names of two persons who have agreed to testify from their personal knowledge to your character. (they must not be related to you and should have direct knowledge of your academic pursuits and attach recommendation letters / character certificates signed by them).

(a) Name _____
Status _____
Address _____

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Signature of Applicant

CERTIFICATE OF PHYSICAL FITNESS
 (To be filled by a Registered Medical practitioner
 in the applicant's country of normal residence)

Name of Applicant _____

Age _____

Nationality _____

Address _____

(City) _____

(Country) _____

1. History

Check after each disease and symptom with (+) for positive findings and (-) for negative findings:-

Scarlet Fever	Diphtheria	Tuberculosis
Rheumatic Fever	Pneumonia	Vertigo
Typhoid	Malaria	Scabies
Small pox	Cholera	Spots
Geng Headache	Deafness	Epistaxis
Ears, tinnitus	Obstruction	Cough
Nose	Chest Pain	Haemoptysis
Cardiorespiratory	Short of breath pain	Tachycardia
Expectoration	Sweat	Type
Palpitation	Night Sweat	AIDS

Given details of any injury, illness or operation during the past five years (be sure to list all illnesses or injuries)

Month & Year	Period of disability	
Injury of illness	from	to
	from	to
Operations	from	to

II Physical Examination

Medical condition of:-

Height _____ Weight _____ Chest _____
Describe abnormalities _____ Head _____ Nose _____
Lungs _____ Eyes _____ Pharynx _____
Heart _____ Ears _____ Neck _____
Reflexes _____

III Lungs

Comment more fully on condition of applicant's lungs.

IV. SUMMARY

I believe this applicant IS/IS NOT physically able to carry on a full – course of study, involving long hours of work in a college or university in India. In my opinion the applicant's health and physical condition in general are:

Excellent

Good

Poor

He/She was successfully vaccinated against smallpox on (Date) _____

He/She was successfully inoculated against smallpox on (Date) _____

He/She presents no evidence of communicable disease or of any fatigue and has no physical defects.

REMARKS

Date _____

Signature _____

Address _____

IMPORTANT:

As a protective measure, those planning to study in India are strongly advised to get vaccinated against typhoid / cholera before coming to India.

CERTIFICATE TO BE FURNISHED BY THE INDIAN DIPLOMATIC REPRESENTATIVE

Certified that I am satisfied
that Mr./Mrs./Miss

_____ (Name of candidate)

is permanently domiciled in

_____ (Name of country)

and on completion of his / her
studies in India will return to

_____ (Name of the country of domicile)

Certified that the entries in the application form, particulars about examination passed, marks and division obtained, subjects studied and the syllabi covered have been checked with the original documents and that the application is complete in all respects. Attested copies of certificates, diplomas or degrees of examination passed are enclosed.

Certified that the candidate's knowledge of English is sufficient to enable his/her to follow lectures and instructions given in English and to take examinations in that language.

Date _____

Signature _____

Place _____

Designation _____