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| UGC%20Logo | **University Grants Commission of Bangladesh**  **UGC Building, Plot # E-18/A, Agargaon Administrative Area,**  **Sher-E-Bangla Nagar, Dhaka-1207**  **www.ugc.gov.bd** |

## Photograph

**Application for PhD Fellowship 2018-2019**

**Instructions:** This form consists of four sections to be completed, Section A-by the Candidate, Section B-by the Supervisor, Section C - by Chairperson/Director of Department/Institution, Section-D by the Vice-chancellor.

## Section-A

**(To be completed by the candidate)**

1. **Name of the candidate in full :**..........................................................
2. **Father’s name :**..........................................................
3. **Mother’s name :**..........................................................
4. **National ID No.:**..........................................................
5. **Address :**

1. Address of correspondence: ................................................................................................................................................................................................................................................
2. Present (Working place) address, if any:

Designation.....................................................................

Department......................................................................

University/College/Institute............................................

1. Permanent Address:

........................................................................................................................

........................................................................................................................

1. **Telephone/Mobile:**..........................................................
2. **e-mail Address:**................................................................
3. **Date of Birth:**...................................................................
4. **Academic records (In chronological order):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Educational**  **institute** | **Board/ University** | **Years attended:**  **From To** | **Degrees/Diplomas or**  **Certificates obtained (with class/Division and year.)** | **Subjects offered** |
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(Attach copies of Board and University certificates)

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10. **Professional Experience (in chronological order, if necessary):**

|  |  |  |
| --- | --- | --- |
| **Name of Post** | **Name of the Employing Organizations** | Period **From To** |
|  |  |  |
|  |  |  |
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11. **Please give details of any home/foreign fellowships or scholarships or research grant (e.g. UGC/International Bodies etc. projects) which the candidate held previously or now holding or for which the candidate has applied.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Project** | **Sponsoring Authority** | **From To** | **Amount** | **Final reports if Published**  **give reference** |
|  |  |  |  |  |
|  |  |  |  |  |

12. **List of publications including books and articles in standard journals. (use extra page, if necessary):**

13. **Please attach a statement about research plan in sufficient detail (you may use the headings below as your guide.):**

1. Title of the proposed research :

(b) Objectives of this research:

(c) Importance of this research in relation to the needs of the Department:

1. Necessity of the proposed research work in the perspective of the country's need:
2. Brief review of the work done with justification of this research:

Contd....../3

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(f) Comprehensive plan of research (in separate sheets showing, inter alias, chapter wise expected date and 'time' needed for accomplishing the proposed research) :

1. State whether any work on the proposed study and/or research has already been done. If so, give details indicating, among others, the expected date/time of completion of the work:
2. State clearly whether the execution of the program will require any extra

funding. Indicate the requirement item wise:

14. **Name and address of the Supervisor with whom the candidate intends to work:**

Name :..........................................................

Designation :..........................................................

Department :..........................................................

University/Institute :..........................................................

Telephone: .............................Res: ........................Mobile:...................

Fax :................................, email :............................................................

15. **Co-Supervisor (if any):**

Name :..........................................................

Designation :..........................................................

Department :..........................................................

University/Institute :..........................................................

Telephone: .............................Res: ........................Mobile:...................

Fax :....................................., email :............................................................

16. **Information about registration for PhD:**

Registration number:...................................Date...................Full-time/Part-time

University/Institute............................................................................................

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17. **Any other information :** ........................................................................

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18. **I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. If selected as a fellow, do undertake to:**

(i) Conduct myself at all times in a manner compatible with my status as a holder of a UGC PhD Fellowship;

(ii) Spend full-time during the tenure of the award in the study PhD program and that I shall not accept any other award/fellowship during the tenure of this UGC PhD Fellowship;

1. Agree with all other conditions that are already laid down and may be laid down in future from time to time about the award;
2. I shall be liable to refund the total amount drawn from the UGC in case I prematurely discontinue my research work without valid reason acceptable to the UGC. Otherwise, UGC shall be entitled to take necessary action get back the withdrawn amount by legal process.

Date........................................ Signature of Candidate:

#### Section -B

**(To be completed by the Supervisor)**

Supervisor's opinion on the under mentioned points about the field of study proposed by the candidate:

1. Suitability of the proposed research for PhD level work:
2. Availability of facilities/study materials adequate for PhD level study within Bangladesh (If fund required to collect research materials from home & abroad, please furnish in a separate sheet the estimated costs involved, and mention sources of funding:
3. Whether the candidate will be accepted by the supervisor :

Contd....../5- 5 -

1. Whether laboratory and library facilities will be fully offered to the candidate:
2. Whether the supervisor approves of the research plan submitted by the candidate :

N.B. Number of MPhil and PhD Fellow currently working under the Supervisor :

MPhil ............. PhD .............. (on going).

Date............................... Signature of the Supervisor

Designation :...................................

Department :...................................

University :.....................................

*e-mail* address:

Date............................... Signature of the Co-supervisor(if any)

Designation :...................................

Department :...................................

University :....................................

*e-mail* address:

**Section-C.**

**(To be completed by the Chairperson/Director of the Department/Institution)**

Mr. / Ms.........................................................................................................

Designation............................................Department of ..............................

University/College/Institute of.....................................................................

Whose particulars are given above is true. He/she is a teacher of public/private university or government colleges/MPO colleges or meritorious student admitted into a Full-time PhD programme in this university.

Date..............................Signature of Departmental Head of Academic Council.

Seal :

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**Section-D.**

**(To be completed by the Vice-Chancellor of the University)**

Mr. / Ms.........................................................................................................

Designation............................................Department of ..............................

University/College/Institute of.....................................................................

Whose particulars are given above is nominated for the award of full time PhD Fellowship offered by UGC. He/She has been admitted into PhD programme approved by the University.

Date..............................Signature of Vice-Chancellor.

Seal :

**Please enclose following documents.**

|  |  |
| --- | --- |
| 1. | Pay order/Bank Draft of Taka 1,000/- (One thousand) in favor of ‘University Grants Commission of Bangladesh’ from any branch of Janata Bank. |
| 2. | Photocopy of PhD registration certificate (verified by Register office). |
| 3. | One Passport size photograph of the candidate. |
| 4. | Copies of all academic certificates and transcripts (attested by Supervisor). |
| 5. | Photocopy of National ID Card |
| 6. | Additional papers (if any) |
| 7. | Tk. 300/-(Three hundred) non-judicial stamp for undertaking purpose. |