

DECLARATION BY THE APPLICANT

1. I agree to abide by the terms and conditions of the Fellowship grant.
2. I have explored and ensured that equipment and basic facilities in the Institution will actually be available as and when required for the purpose of the work.
3. I have not availed Emeritus Scientist Fellowship from KSCSTE or elsewhere earlier.
4. I also AFFIRM that all statements and documents submitted along with this application are correct. I understand that any inaccurate or false information will render this application invalid and that, if admitted and awarded Emeritus Scientist Fellowship on the basis of such information, my candidature will be terminated. I also understand that I have to undertake the agreement, in prescribed format with KSCSTE for fulfilling the conditions necessary for awarding the Emeritus Scientist Fellowship, if selected.

Place

Signature:

Date:

Name & Address: