

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 Post-Doctoral 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 Post-doctoral 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 Post-Doctoral Fellowship, if selected.

Place

Signature:

Date:

Name & Address: