

# INDIAN COUNCIL FOR CULTURAL RELATIONS

## APPLICATION FORM FOR ICCR SCHOLARSHIPS FOR FOREIGN NATIONALS FOR THE ACADEMIC YEAR 2014-15

Please tick Scholarship Scheme for which application is being made:

` .	) ) )	Scholarships under bilateral Cultural Exchange Programmes (CEP Scholarship) Scholarships for students from Commonwealth Countries (ICCR's Commonwealth Scholarship Plan)							
(	)	Scholarships for students from Commonwealth Countries (ICCR's Commonwealth Scholarship Plan)							
	)	Scholarships for students from Commonwealth Countries (ICCR's Commonwealth Scholarship Plan)							
,	,	Scholarships for students from African Countries							
(	)	Scholarships for students from SAARC Countries							
(	)	Scholarships for students from Mekong Ganga Co-operation (MGC) Countries							
(	)	AYUSH Scholarships to study Indian Traditional Medicine Systems such as Ayurveda, Unani, Siddha &							
		Homeopathy (available for students from all Countries, though priority is given to those from BIMSTEO							
		Countries)							
(	)	AYUSH Scholarships to study Indian Traditional Medicine Systems such as Ayurveda, Unani, Siddha a							
		Homeopathy for Malaysian nationals							
(	)	Scholarships for Afghan nationals							
		Scholarships for Sri Lankan nationals							
		( ) Nehru Memorial Scholarship Scheme							
		( ) Maulana Azad Scholarship Scheme							
		( ) Rajiv Gandhi Scholarship Scheme							
(	)	Scholarships for Bangladeshi nationals							
(	)	Scholarships for Nepalese nationals (also known as Silver Jubilee Scholarship Scheme)							
(	)	Scholarships for Mongolian nationals							
(	)	Scholarships for Bhutanese nationals							
(	)	Scholarships for Maldivian nationals							
(	)	ICCR Cultural Scholarship Scheme (For Dance/Music/Yoga/Art)							
		For further specifications of each Scheme, may refer to ICCR Website							
	Ρl	ease tick one of the following course options: ( ) UG ( ) PG ( ) Ph.D ( ) Ayush							

Website: www.iccrindia.net

#### INSTRUCTIONS TO CANDIDATES FOR FILLING THE APPLICATION FORM

- 1 All entries (except the signature) in the application should, be typewritten or handwritten in block letters (capitals).
- 2 Six copies of application, duly filled and properly tagged, are to be submitted.
- 3 Each copy should be complete in all respects, with all the required information and all necessary supporting documents, as listed below:
- A recent passport size photograph (taken not earlier than a year before the date of the application) should be pasted on the application form in the space provided for the purpose. The name should be written on the photograph for purpose of identification.
- ii. Apart from these six photographs which are to be pasted on the applications, one additional photograph, not pasted to any form, must be supplied.
- iii. Certified copy of the syllabi, curricula, etc. of courses covered in schools, colleges, universities attended (except the Senior Cambridge, High Cambridge and London General Certificate of Education examination) with full details. Note: If this information is not supplied, your application will not be considered, as this information is required in order to establish equivalency with Indian academic standards.
- iv. Certified photostat copies of all academic qualifications certificates and marksheets, including those relating to school leaving examination, which are mandatory for the course for which you have applied.
- Note: Please ensure that certified copies of documents showing specific qualifications required for the course of your choice (such as GMAT scores for admission in MBA/TOEFL/IELTS scores for English courses etc.) are also attached. The requirements can be checked from the UGC website / Handbook or from the website of the institution concerned.
- v. A certificate of physical fitness in the prescribed form.
- vi. Recommendations / character certificates as required under S. No.15 of this form.
- vii. Certified copies of relevant pages of candidate's valid passport (max validity), showing photograph, name, contact details, date of issue, date of expiry and place of issue. (Note: Please ensure that your passport is valid for the duration of the course for which you have applied.)

(ORIGINAL DOCUMENTS SHOULD NOT BE SENT WITH THE APPLICATION AS THESE WILL NOT BE RETURNED TO THE APPLICANT.)

### **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:
iv.	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
8.	Details of Father / Guardian Name:
	Relation (F/G):
	Occupation:
	Nationality:
	Address of permanent: residence of Father / Guardian

9.	Knowledge of proficiency Written Spoken Specify level of examin	Good ( Good (	)	Fair ( Fair ( d grades	) ) s obtained.	Poor ( Poor (	)	
10	.Knowledge of any other la	nguage _						
	Written Spoken Understand	Good ( Good ( Good (	) ) )	Fair ( Fair ( Fair (	) ) )	Poor ( Poor ( Poor (	) )	
(a)	. Give details, if any Proficiency acquired in ga Part taken in other extra-c			d				
12	2. State in order of preferen 1.	ice the Un	iversities / Institut	es in Ind	lia in which you se	ek admiss	ion:	
	2.							
	3.							
	NOTE: Please refer to "Universities Handbook of India" available with the Indian Diplomatic Mission in your country or go to University Grants Commission (UGC) website at <a href="http://www.ugc.ac.in">http://www.ugc.ac.in</a> Please note that ICCR provides scholarships only for courses in central or state government universities as listed by the UGC, and for courses in deemed universities which have been approved by UGC.							
	There is no guarantee of 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. However, the Council reserves the right to offer admissions for any course or institution in India even if these are not among the candidate's preferred choice. While the candidate may decide whether or no to accept such an offer, it may be noted that once accepted, no change in either course or University will be permitted.							
13	13. State in order of preference the courses which you would like to study in India.  1.							
	2.							
	3.							
	NOTE: Candidate should be very specific and clear about the course of study, which he / she wishes to pursue in India. Scholarships are not available to pursue more than one course. Candidate should ensure that the courses listed here are offered by all three of the Universities listed under S.No.12 above. The candidates must refer to the Universities/Institute Website to know the eligibility criteria for the courses of their choice.							

### 14. PREVIOUS EDUCATIONAL QUALIFICATIONS (Fill in all columns which are applicable to you):

Certificate /	Degree	Country	Name of School/ University / Board		Year of Graduation	Percentage
School Leavir (equivalent to India)	ng Grade XII in		Sinverency / Beard			
Undergradua (equivalent to after grade XII	three years course					
the abov undergradu	e asters' course after ve mentioned ate or five years' se after grade XII)					
DOCTORAL (Ph.D) (After Masters' Degree)						Accepted OR  Not yet accepted
Note: Details of any course in Indian Universities / Institutes which the scholar is currently attending or has in past may be given below.				or has attended		
Year	Na	me of University /	Institute	Cours	6 <b>e</b>	

15.	character (they must n	of two persons who have agreed to testify from their person to be related to you and should have direct knowledge of y dation letters / character certificates signed by them).	
(a)	Name Status/ Designation Address E-mail		
(b)	Name Status/ Designation Address E-mail		
16.	Details of close relative	e (s) or friends, if any, in India.	
V.	Status/ Designation Address Tel No.		
	·	ived in India in the past. If so, mention places visited and date of ICCR Scholarship earlier? If so, please give full details.	es of such visits.
	Year of Scholarship		
(iii)	Name of Course Name of the Institute / Total duration of stay in		
19.	Any general remarks vand sign the same).	which you would like to offer (if the space is not sufficient, a	ttach a separate sheet
	Date		
	Place		Signature of Applicant
	have understood the to	he particulars given above are true to the best of my knowlerms and conditions of the Scholarship Scheme as given abundertake to abide by them, and that I also undertake to retues in India	ove and in Annexures

#### **CERTIFICATE OF PHYSICAL FITNESS**

(To be filled by a Registered Medical practitioner in the applicant's country of domicile)

Name of Applican	ıt	
Sex M/F		
Marital Status		
Age		Blood Group
Nationality		· · · · · · · · · · · · · · · · · · ·
Address		· · · · · · · · · · · · · · · · · · ·
(City)		
(Country)		· · · · · · · · · · · · · · · · · · ·
Telephone No.		
Email Address		· · · · · · · · · · · · · · · · · · ·
impact the	patient's health at the	etails of any past medical condition which may adversely current time or in the near future).
	/ Known Illness / Surg	
Raised BP -	Yes No	If, yes – on Regular treatment - Yes No
DM -	Yes No	If, yes – on Regular treatment - Yes No
IHD -	Yes No	If, yes – on Regular treatment - Yes No
Stroke -	Yes No	If, yes – on Regular treatment - Yes  No
Kidney Disease	::	
Chronic Renal	Failure – Yes No	If, yes – on Regular treatment - Yes No
Any history of	Surgery / prolonged h	nospitalization (more than 2 weeks)

Yes/No; if yes, details of illness / injury / surgery with duration of illness/ treatment

Α		ppetite - Yes [	No No	
Any history of loss of V  Any history of digestive		Veight - Yes [	No	
		e diseases - Yes [	No	
F	amily History of :	DM HT [	Obesity	
Α	ny known Allergy:-	If so, is the patient or	any medication / precautions?	
II.	Physical Examir	nation		
Med	ical condition of:-			
Heig	ht	Weight	Chest	_
Head	d	Nose	Lungs	
Eyes	<b>.</b>	Pharynx	Heart	
Ears		Neck	Reflexes	
III.				
			(including Fasting & P.P), Urine Test an by the Medical Practitioner (to rule out any	
IV.	X-Ray and any of		` '	
<b>IV.</b> 1.	X-Ray and any of disease).  Summary  I believe this applic	her test as deemed fit	by the Medical Practitioner (to rule out any	chronic
	X-Ray and any of disease).  Summary  I believe this applic hours of work, in a	cant IS / IS NOT physica	by the Medical Practitioner (to rule out any	chronic
1.	X-Ray and any of disease).  Summary  I believe this applic hours of work, in a	cant IS / IS NOT physica	by the Medical Practitioner (to rule out any ly able to carry on a full course of study, invol- dia.	chronic
1.	X-Ray and any of disease).  Summary  I believe this applic hours of work, in a ln my opinion the a	cant IS / IS NOT physica	by the Medical Practitioner (to rule out any ly able to carry on a full course of study, invol- dia.	chronic

3.	I certify that the applicant is up-to-date on routine vacci DPT, Varicella, Hepatitis A & B etc.	nations including, among others, MMR,
4.	He / She has no physical condition / aliment which would study in India.	hinder him from pursuing a full course of
5.	He / She present no evidence of any communicable disea	se or of any chronic fatigue.
6.	He / She does not have any chronic medical condition medical treatment.	which requires regular and sustained
NOTE	: If answers to 4, 5 and 6 above are positive, please give de	etails in Remarks column below.
REMA	ARKS	
	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.

#### INDIAN COUNCIL FOR CULTURAL RELATIONS

AZAD BHAVAN, I.P. ESTATE, NEW DELHI-110002. INTERNATIONAL SCHOLARSHIP DIVISION

# JOINING REPORT OF THE SCHOLAR FOR ACADEMIC SESSION 2014-15 (NOT TO BE SUBMITTED WITH THE APPLICATION)

1.	Name of the scholar	:
2.	Name of the scheme under which selected	:
3.	Country of domicile	·
4.	Course of study to which admitted	:
5.	Date of leaving the country	:
6.	Date of arrival in India	:
7.	Date of joining the Institute/University	:
8.	Name & Address of the Institute/ University where admitted	:
9.	Duration of the entire course	: Date Month Year
		From:
		To:
10.	Duration of summer vacation	From:
		To:
11.	Name of the competent authority in whose name the maintenance allowance etc. should be sent.	:
12.	Hostel or residential address of the scholar at the place of study in India with email address/ Mobile Tel. No.	:
13.	Passport number with duration of the passport	:
14.	Whether allotted hostel accommodation? If so, name of the hostel.	:
15.	Roll No./Reg. No./I.C. No.	:

Note: Theses two pages may be kept with the candidate. Upon completion of all registration formalities this form is to be submitted to concerned ICCR Regional Office / ISD Section, ICCR in person or by post. Please ensure that the form is duly stamped and signed by concerned authorities in the Institution/ Universities where the scholar joins. It is mandatory to submit the Joining Report within 2 months of arrival in India failing which, further scholarship dues would be withheld.

16. I. Compulson	ry Fees						
Tuition fee	l Year	II Year	III Year	IV Year	V Year		
Admission fee			:	-			
Enrolment fee			:	-			
Registration fee			:	-			
Laboratory fee			:	-			
College Exam. fee			:	-			
University Exam fee			:	-			
II. Other Compulsor	y Fees – (As p	er University Fee Circular)					
Marks sheet fee			:	-			
Identity Card fee			:	-			
Library reading room	ı fee		:	-			
Gymkhana/Games/A	thletic fee		:	-			
Medical fee			:	:			
Recreation fee			:	-			
III. Refundable Char	rges – (To be	paid by scholar)					
Caution Deposit			:	-			
Security Deposit			:	-			
Any other refundable	e charges		:	-			
IV. Hostel rent (Roo break up)	m rent, water	& electricity charges with	1 :	-			
accommodation is accommodation w	n the hoste as available, ation for wh	nas not been allotted  I, a certificate to this the scholar could not l ich he / she is paying Rs	effect stating that be provided hostel a	"This is to certify ccommodation and	that as no hosteld he /she had hired		
Rates prescribed b	y the Univer	hat the charges mentic sity as per the Universi ime, amount charged to	ty fee circular in forc	e. In case any ina	idmissible charges /		
		Signature of Head of th	e Institute:				
		Name in Block Letter: _					
		Date	Designation and	d seal			

Important: Students may kindly note that in any future correspondence with ICCR, the name of the country, scholarship scheme and year of joining must be mentioned.