



NORTH EASTERN REGIONAL INSTITUTE OF SCIENCE AND TECHNOLOGY

(Under Ministry of Education, New Delhi)
(Deemed to be University u/s 3 of the UGC Act, 1956)
Nirjuli 791109 :: Arunachal Pradesh

No. Acad/Ph.D./Rev. Schol./285/2012/Vol-V

Dated, Nirjuli the 2nd March '2023

CIRCULAR

Sub : Enhancement of Scholarship/Institute fellowship for Full Time Scholars

This is for information to all the Research Scholars who have completed 2 (two) years period of research in their respective fields, that they may submit their applications along with their publication(s) as per enclosed format for enhancement of scholarship/Institute fellowship for consideration of Review Committee as constituted for the purpose. **Applications may be submitted latest by 17.03.2023** in the Academic Section for further necessary action.

Encl : Format

Sd/-
Dean(Acad)

No. Acad/Ph.D./Rev. Schol./285/2012/Vol-V

Dated, Nirjuli the 2nd March '2023

Copy to :-

1. All HoD/HoC – with a request to circulate among their Research Scholar(s).
2. Dean (Academic) – for information please.
3. Network Administrator, NERIST for uploading on the Institute website.
4. Notice Boards.
5. Office Copy.

(Dr. K. K. Rajesh)
Assistant Registrar (Academic)

02/03/2023



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APPLICATION FORM FOR ENHANCEMENT OF FELLOWSHIP AMOUNT TO Ph.D. (FULL TIME) SCHOLARS

1.	Name of the Scholar	Mr./Ms.			
2.	Roll No.				
3.	Registration No.				
4.	Department/Centre				
5.	Date of joining the Ph.D. Programme				
6.	Monthly Fellowship Amount presently drawing				
7.	Date of completion of 2-years tenure				
8.	Approved Title of Ph.D. Work				
9.	Publications in Indexed Journals and Conferences (with proof):				
Sl. No.	Title of the Paper	Name of the Author(s)	Name of the Journals(s)	Date of Publication (Month & Year)	Index No.

N.B.: Please attach separate Sheet as per requirement.

DECLARATION

I do hereby declare that all the information stated above are true, correct and in the event of any information found to be false/forged at a later stage, I shall be solely responsible for that and Institute may take suitable action against me.

Signature of the Scholar with Date

For Official Use of the Concerned Department/Centre	
Progress of the Scholar	Satisfactory/Not Satisfactory
Recommendation of the concerned Supervisor/Co-Supervisor for enhancement of Fellowship	Recommended/Not Recommended Signature of Supervisor/Co-Supervisor Name : _____
Recommendation of the concerned Chairman, DC	Recommended/Not Recommended Signature of Chairman, DC Name : _____
Forwarding of concerned HoD/HoC/Chairman, DPGC	Signature of HoD/HoC/Chairman, DPGC Name : _____