

# आयुक्तालय कॉलेज शिक्षा, राजस्थान, जयपुर

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दिनांक 16.08.2023

प्राचार्य,  
समस्त राजकीय महाविद्यालय,  
राजस्थान

विषय:- NET/SLET सम्बन्धित बजट घोषणा (वित्तीय वर्ष 2023-24) के बजट मद एवं आवेदन पत्र  
बाबत।

उपरोक्त विषयान्तर्गत NET/SLET फ़ैलोशिप एवं कॉन्फ़ेस/सेमीनार/वर्कशॉप में भाग लेने  
हेतु आवेदन पत्र का प्रारूप आयुक्तालय, कॉलेज शिक्षा के वेबसाइट पर अपलोड किए जा चुके हैं।

उपरोक्त बजट घोषणा का बजट मद निम्नानुसार है:-

2202-03-107-07-01-13

कृपया स्प्रेडशीट NET/SLET\_BA2023 में अपडेशन की कार्यवाही प्राथमिकता से कराने का श्रम करायें।

संलग्न- उपरोक्तानुसार।

प्रतिलिपि:-

1. निजी सचिव, आयुक्त, कॉलेज शिक्षा जयपुर।
2. संयुक्त सचिव, (ग्रुप-4), उच्च शिक्षा विभाग, शासन सचिवालय, जयपुर।
3. वेबसाईट प्रभारी, आयुक्तालय कॉलेज शिक्षा, जयपुर को अपलोड करने हेतु।
4. रक्षित पत्रावली

(डॉ.सीमा कश्यप)  
संयुक्त निदेशक(अकादमिक)

**Signature valid**

Digitally signed by Seema Kashyap  
Designation: Associate Professor  
Date: 2023.08.16 17:50:02 IST  
Reason: Approved

RajKaj Ref No. : 4520988



## Application Form

(To be submitted at College/University by the NET/SLET qualified registered Research Scholar)

1. Name of the Research Scholar:
2. Father/Mother Name:
3. Gender: Male/Female
4. Category (Tick whichever is applicable): SC/ST/MBC/OBC/EWS/General
5. Name of College/University Department:
6. Supervisor Name/Co-Supervisor Name:
7. Registration Date (proof to be attached):
8. Research title:
9. Communication Address of the Research Scholar:
10. Email & Mobile Number:
11. Account Number (copy of bank pass book to be attached):
12. Account Holder Name:
11. IFSC Details:
13. Bank Address:
14. Janaadhaar Number:
15. Declaration by the Research Scholar

Please affix a recent  
photograph

photo

I have gone through the guidelines of the scheme. I am not availing any other fellowship/financial assistance for this purpose from Central Govt./State Govt. or any other sources for conducting my research work. I shall abide by the terms and conditions mentioned in the guidelines. I undertake, that if at any stage, it is found to the satisfaction of the sanctioning authority that the information given by me is false or if I violate the terms and conditions of the fellowship guidelines, the fellowship sanctioned to me, may be cancelled and the entire amount of fellowship will be refunded by me or recovered from me, apart from liability for such penal action as warranted by law

Signature

(Name of the Research Scholar)

**CONTINUATION CERTIFICATE**

This is to certify that ..... (Name of the research scholar) has continuously been working in the .....department. He/She has availed .....leaves in the month.....

(Signature)  
Research Scholar

(Signature)  
Supervisor

(Signature)  
Principal

(Signature)  
HoD in case of University

(Signature)  
Registrar in case of University

Date:

Date:

Date:

Date:

Date:

## **Application Form to be submitted by Research Scholar**

**(For financial assistance to participate in Conference/Seminar/Workshop)**

### **1. Personal Details of the Research Scholar**

- a) Name of the scholar:
- b) Father/Mother Name:
- c) Gender: Male/Female
- d) Name of College/University Department:
- e) Stream of the student: Science/Commerce & Management /Humanities, Social Science& Liberal Arts
- f) Category (Tick whichever is applicable): SC/ST/MBC/OBC/EWS/General
- g) Communication address of the student:
- h) Email & Mobile Number:
- i) Registration Date (proof to be attached):
- j) Janaadhaar Number:

### **2. Details of Conference/Seminar/Workshop**

- a) Name of Conference/Seminar/Workshop:
- b) Details of the organizing institution:
- c) Duration and dates:
- d) Invitation/Participation proof (Please attach copy of the email/letter issued by the program organizing institution):
- e) Registration Fees Detail (please attach proof):
- f) Details of financial support provided by the Organizing Institution (if any):

### **3. Declaration from the research scholar:**

- I am not receiving/claiming financial support for participation in Conference/Seminar/Workshop from any other agency/organization, for expenses for which I am submitting my application. I undertake, that if at any stage, it is found to the satisfaction of the sanctioning authority that the information given by me is false or if I violate the terms and conditions of the guidelines, the financial support sanctioned to me, may be cancelled and the entire amount will be refunded by me or recovered from me, apart from liability for such penal action as warranted by law

Signature

(Name of the Research Scholar)

**4. Supervisor/Co-Supervisor recommendation format**

I recommend Mr/Ms.....who is registered as a research scholar under my supervision at.....College/University Department to participate in ..... conference/seminar/workshop at ..... (Name of the organizing institution) from.....to ..... (Duration). This will help Mr/Ms.....acquiring new knowledge which will be supportive in his/her research work/career development

(Signature)

Name of the Supervisor/Co-Supervisor

**Application form for reimbursement of expenses of participation in  
Conference / seminar / workshop  
(To be submitted by research scholar)**

1. Name of the scholar:
2. Registration Date (proof to be attached):
3. Account Number: (attach bank pass book copy):
4. Account Holder Name:
5. IFSC Details:
6. Bank Address:
7. Janaadhaar Number:
- 8. Details required for reimbursement for participation in Conference / Seminar/ Workshop**
  - A. Name of Conference/Seminar/Workshop:
  - B. Organizing Institution:
  - C. Duration and dates :
  - D. Invitation/Participation proof (Please attach copy of the email/letter issued by the program organizing agency):
  - E. Registration Fees Detail (please attach proof):
  - F. Travel fair details (please attach proof):
  - G. Accommodation charges details (please attach proof):
  - H. Stationary expenses/Poster presentation expenses/other miscellaneous expenses (self-certified by research scholar and verified by the supervisor/co-supervisor):
  - I. Recommendation of the Ph.D. Supervisor
  - J. Details of earlier financial support received (if any) under this scheme:

**9. Declaration from the Research Scholar:**

- I have not received/claimed financial support for participation in Conference/Seminar/Workshop from any other agency/organization. I undertake, that if at any stage, it is found to the satisfaction of the sanctioning authority that the information given by me is false or if I violate the terms and conditions of the guidelines, the financial support sanctioned to me, may be cancelled and the entire amount will be refunded by me or recovered from me, apart from liability for such penal action as warranted by law

Signature

(Name of the Research Scholar)