### Appendix 2.12 Application Form for the UGC MPhil Fellowship

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|  | UNIVERSITY GRANTS COMMISSIONSanothimi, Bhaktapur, NepalRESEARCH DIVISIONMF-1 |  | Affix a passport size color photo |
|  |  |

Application for the UGC MPhil Fellowship

**Incomplete application will not proceed for evaluation**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Faculty |  |  | Young |  |  | To be filled by the UGC |
|  |  |  |  |  |  | Draft No./Bill No. of Rs. 200/-Deposit: |
|  |  |  |  |  |  | Date: |
|  |  |  |  |  |  | Verified by: |

**1. Personal Information**

|  |  |  |  |
| --- | --- | --- | --- |
| A1. Applicant’s Full Name (capital letter): | A2. Gender: | A3. Age: | A4. Date of Birth: |
| A5. Last Degree Obtained: | A6. Citizenship No., Issuing District: | A7. Underprivileged Group: |
| A8. Permanent Address: | A9. Mailing Address: |
| A10. Telephone:* Residence:
* Office:
* Mobile:
 | A11. Email: | A 12. Employment:* Designation:
* Institution:
* Address:
 |

**2. Information about MPhil. Program Registered**

|  |  |  |
| --- | --- | --- |
| B1. University: | B2. Campus/School: | B3. Department: |
| B4. Cluster:(Indicate by √ ) | a. Agriculture/Forestry |  | e. Education |  |
| b. Science & Technology |  | f. Humanities & Social Sciences |  |
| c. Health Sciences |  | g. Management |  |
| d. Engineering |  |  |  |
| B5. Registered for Degree: | B6. Subject: | B7: Specialization: |
| B8. Registration Number: | B9. Date of Registration: | B10. Expected Date of Completion: |

**3. Institutional Compliance with the UGC Minimum Standard for MPhil Program**

|  |
| --- |
| **Q.** Does the institution you are enrolled in comply with the UGC Minimum Standard and Procedure for MPhil Degree 2073?( ) Yes - You are eligible to apply for the UGC MPhil Fellowship( ) No - You are not eligible to apply for the UGC MPhil Fellowship |

**3. Academic Record**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Degree | Year  | Major Subjects | Division/Grade | Percentage(%) | Board/ University |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**4. Employment Record** (Please include complete list in your CV)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Period of Service | Designation | Name and Addressof the Institution | Assignments | Permanent/ Temporary | Full Time/ Part Time |
| From | To |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**5. Publication Record** (Please include the complete list in your CV)

|  |
| --- |
| 1. Major Research Publication in **Ranked Journals/Proceedings (SCImago Journal Ranking/JCR Impact Factor )** |
|  | Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year) | Rank\*/IF (Year) |
| 1 |  |  |
| 2 |  |  |
| 2. Major Research Publication in **Non-Ranked Peer-Reviewed Journals**  |
|  | Format: Authors, Title, Journal, Volume (Number), First page - Last page (Year) | Country |
| 1 |  |  |
| 2 |  |  |
| 3.Major Research Reports (any part of it not published in any journal yet) |
|  | Format: Authors, Title, Submitted Institution (Year) |
| 1 |  |
| 2 |  |

\*For SCImago Rank, visit: http://www.scimagojr.com

**6. Previous UGC Grants Received** (Please attach a copy of the completion letter)

|  |  |  |  |
| --- | --- | --- | --- |
| Year | Program | Title | Period |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Q.** Do you have any other UGC funded research project currently running? ( ) Yes - You are NOT ELIGIBLE to apply for the UGC MPhil Fellowship now( ) No - You are eligible to apply for the UGC MPhil Fellowship now |

**7. References**

Provide details of TWO referees who may be in better position to explain why you should be considered for this fellowship. They should not have any family relations with you.

|  |  |  |
| --- | --- | --- |
|  | Referee 1 | Referee 2 |
| Name |  |  |
| Organization |  |  |
| Designation |  |  |
| Phone Number |  |  |
| Email |  |  |

**8. Documents Required (Check √ if included)**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Copy of Citizenship |  | 5. Copy of Job Certificate (for faculty) |  |
| 2. Copies of Academic Diplomas (Masters and above) |  | 6. Curriculum Vitae |  |
| 3. Copy of Equivalence Certificate (if any) |  | 7. Certification of 'No Support from Other Source'\* |  |
| 4. Copy of Certificate of Underprivileged Group (if any) |  | 8. Copies of First Page of Research Articles with Abstract (if any) |  |

\*Certification from Head of the Host Institution stating that the applicant has not received any financial support for MPhil program from any other source

**9. Confirmation by the University/Department Where MPhil Candidate Has Been Registered**

We certify that statements made above by the candidate have been verified and found true. If the applicant is selected for the fellowship, he/she will be provided with available resources, facilities and guidance necessary to conduct and complete the research requirement of the program in this institution.

We reaffirm that the PhD program in our institute fully complies with the UGC Minimum Standard and Procedure for MPhil Degree 2073.

Name of the Institution/Department: . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

[Official Seal]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Name: . . . . . . . . . . . . . . . . . . . . . . . . . .

Designation:. . . . . . . . . . . . . . . . . . . . . .

Date: . . . . . . . . . . . . . . . . . . . . . . . . . . .

(Head of the Institution/Department)

**10. Attestation by the Head of the Employing Agency.**

It is to certify that statements made above have been verified and found true. If the applicant is selected for the UGC MPhil fellowship, he/she will be provided with study leave from our institution to complete the program.

Name of the Employing Institution: . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

[Official Seal]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Name: . . . . . . . . . . . . . . . . . . . . . . . . . .

Designation:. . . . . . . . . . . . . . . . . . . . . .

Date: . . . . . . . . . . . . . . . . . . . . . . . . . . . .

**11. Undertaking by the Applicant**

I hereby declare that I have read (a) The UGC Minimum Standard and Procedure for PhD/MPhil Degree 2073, (b) The UGC Policy and Procedure against Research Misconduct, and (c) The UGC Funding Policies of The UGC Research Development and Innovation Programs Implementation Guidelines 2021, and agree to the conditions and my obligations as an applicant. I solemnly affirm that the information I have provided are true. Any research misconduct on my part and the information provided found false at any moment, I shall be liable to disciplinary action, which may result in termination of Fellowship funding and/or rejection of application.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Name: . . . . . . . . . . . . . . . . . . . . . . . . . . . .. . . . .

Date: . . . . . . . . . .. . . . . . . . . . . . . . . . . . . . . . . .

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| **Thumb** |
| Right | Left |
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