

**INDIAN COUNCIL OF MEDICAL RESEARCH
FELLOWSHIP RULES**

JOINING REPORT

**AWARD OF JUNIOR RESEARCH FELLOWSHIP
IN
LIFE SCIENCES AND SOCIAL SCIENCES**

**Photo attested
by guide
with rubber seal**

Name of Awardees

National Eligibility Test Date (Attested Copy to be enclosed):

This is to certify that has joined the Department of for doing Ph.D.....under the above scheme of the **Indian Council Of Medical Research** with effect from (F.N./AN) He/ She will be provided with all necessary facilities during his/her tenure of award. The terms and condition of the offer are acceptable to the awardees. His/her date of Ph.D **registration** is.....(for already registered candidate).

Also certified that the fellow shall not accept/hold any emoluments, paid or otherwise, or receive emoluments, salary, stipend etc. from any other source during the tenure of the award.

Signature of Awardee

Signature of Supervisor

Signature Head of Dept

Signature Registrar/Principal/Director