**Application Form for ‘ICAI Doctoral Scholarship Scheme 2020’**

1. Name of the Applicant:
2. Age:
3. Date of Birth:
4. Mobile no:
5. E-mail id:
6. ICAI Membership no:
7. Marks% in 10th Standard and Year of Passing:
8. Marks% in 12th Standard along with stream and Year of Passing:
9. Marks% in Graduation along with stream, and Year of Passing and University Name, if applicable:
10. Marks% in CA Foundation and Year of Passing:
11. Marks% in CA Intermediate and Year of Passing:
12. Marks% in CA Final and Year of Passing:
13. If Post-Graduate degree % of marks, Year, subject with Name of the University:
14. If MPhil, Name of the University:
15. If NET/SLET, Year of Passing:
16. PhD Registration/enrolment number:
17. Whether availed/awarded any Doctoral Fellowship from any other body/institution:

**Enclosures to be sent to Secretary, Research Committee along with the duly signed application form and to be forwarded by the Guide duly signed and stamped by the Institution (Please tick/reply against the enclosures submitted):**

1. Research Proposal in not more than 3000 words
2. Abstract of Research Proposal in not more than 300 words
3. Self-Attested copy of Class X Marksheet
4. Self-Attested copy of Class XII Marksheet
5. Self-Attested copy of Pass Certificates for Class X & XII
6. Self- Attested copy of proofs of qualification for NET/SLET/MPhil etc
7. Self -Attested copy of ICAI Membership
8. Self -Attested copy of PhD Enrolment/Registration

**Note:** The scanned copy of application form along with the enclosures may be submitted at [doctoral.research@icai.in](mailto:doctoral.research@icai.in) . However, while awarding the scholarship, original documents of all the enclosures shall be mandatorily required.

**I hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. Further I had not availed UGC Junior Research Fellowship (JRF)/Rajiv Gandhi National Fellowship (RGNF)/ Maulana Azad National Fellowship (MANF)/ICSSR/ICAR/CSIR/ICPR/ICMR/ICHR or any such doctoral fellowship awarded.**

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(Signature of the applicant)

Place:

Date:

Forward by

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Signature of the forwarding authority along with Stamp/Seal

Name:

Designation:

Place:

Date: