

# భారతీయ సాంకేతిక విజ్ఞాన సంస్థ హైదరాబాద్ भारतीय प्रौद्योगिकी संस्थान हेदराबाद Indian Institute of Technology Hyderabad

<u>APPLICATION FORM</u>
<u>FELLOWSHIP FOR INTERNATIONAL RESEARCH SCHOLARS IN TECHNOLOGY (FIRST@IITH)</u> **JULY 2024 ADMISSIONS** 

The soft copy of the complete application form with the electronic copies of all the testimonials should be mailed to ia.ir@iith.ac.in on or before 20th April, 2024 / 17:00 IST

INSERT YOUR RECENT PASSPORT SIZE PHOTOGRAPH BELOW (Click on the image for uploading your image)

# **A. PERSONAL INFORMATION** LAST/FAMILY NAME: GIVEN/FIRST NAME: DATE OF BIRTH SEX Μ (DD/MM/YYYY): F Others NATIONALITY OR **CITIZENSHIP** PASSPORT NO. **PERMANENT** ADDRESS: COUNTRY: ZIP CODE: **PRESENT ADDRESS** COUNTRY **ZIP CODE** EMAIL:

MOBILE NUMBER:

## **B. EDUCATIONAL DETAILS**

NAME OF THE
MASTER'S
DEGREE

NAME OF THE BACHELOR'S DEGREE		
MEDIUM OF STUDY	ENGLISH OTHERS	
AREA / SPECIALIZATION		
BACHELOR'S THESIS TITLE (WRITE NOT APPLICABLE IF NOT ANY)		
NAME OF UNIVERSITY/ INSTITUTE:		
QS RANKING (WRITE '0' IF NOT AVAILABLE)		
ADDRESS:		
COUNTRY:		ZIP CODE:
C.G.P.A./ PERCENTAGE (MAXIMUM OF THE SCALE)		RANK (IF AVAILABLE)
YEAR OF [GRADUATION		

ANY OTHER DEGREE/ DIPLOMA					
MEDIUM OF STUDY	ENGLISH OTHERS				
NAME OF UNIVERSITY/ INSTITUTE:					
QS RANKING (WRITE '0' IF NOT AVAILABLE)					
ADDRESS:					
COUNTRY:		ZIP CODE:			
C.G.P.A/ PERCENTAGE (MAXIMUM OF THE SCALE):		RANK (IF AVAIL	ABLE)		
YEAR OF GRADUATION					
C. PROFESSIONAL CHRONOLOGICAL OR	EXPERIENCE (TWO	MOST RECEI	NT EXPERIENCES	ONLY IN	REVERSE
COMPANY/ ORGANIZATION					
ADDRESS					
COUNTRY			ZIP		
FROM (DD/MM/YYYY)	TO (DD/MM/ YYYY)				

COMPANY/ ORGANIZATION			
ADDRESS			

TO

(DD/MM/YYYY)

ZIP

# D. ACADEMIC/RESEARCH ACHIEVEMENTS

GRE/ILTS/TOEFL YEAR AND SCORE (WRITE NA IF NOT AVAILABLE

FROM (DD/MM/YYYY)

**COUNTRY** 

LIST OF MAXIMUM THREE BEST SCOPUS INDEXED PUBLICATIONS (WRITE NOT AVAIABLE IF YOU DO NOT HAVE)

LIST OF MAXIMUM TWO MOST IMPORTANT PATENTS (WRITE NOT AVAIABLE IF YOU DO NOT HAVE)

AWARDS/ RECOGNITIONS (WRITE NOT AVAIABLE IF YOU DO NOT HAVE)

## **E. PROPOSAL AND SOP**

PROPOSED	
AREA OF	
RESEARCH	
(SCROLL & SELECT)	

OUTLINE OF THE PROPOSED RESEARCH (WITHIN 2500 CHARACTERS) STATEMENT OF PURPOSE FOR APPLYING FOR FIRST FELLOWSHIP (WITHIN 2500 CHARACTERS)

#### F. REFERENCES

ADD THREE REFEREES. THE CANDIDATE SHOULD ARRANGE TO SEND AT LEAST ONE REFERENCE LETTER FROM ONE OF THE REFEREES LISTED BELOW TO <a href="mailto:ia.ir@iith.ac.in">ia.ir@iith.ac.in</a> BY 20th APRIL 2024)
NAME OF THE REFEREE 1
AFFILIATON
COUNTRY
E-MAIL
NAME OF THE REFEREE 2
AFFILIATION
COUNTRY
E-MAIL
NAME OF THE REFEREE 3
AFFILIATION
COUNTRY
E-MAIL
G. DECLARATION
I, HEREBY, DECLARE THAT THE INFORMATION SUPPLIED HERE IS TRUE TO THE BEST OF MY KNOWLEDGE
WRITE YOUR NAME (EXACTLY THE WAY IT APPEARS IN THE PASSPORT) AS SIGNATURE
PLACE
DATE (DD/MM/YYYY)