DISBURSEMENT OF FELLOWSHIP/ CONTINGENCY/ HRA:

The fellowship amount shall be disbursed through Online RTGS into the bank account of the awardee directly.

| Description of Payable Amount Stage | | M.Phil. | Ph.D | List of Documents to be submitted | | | | |
|--|-------------------------|--|--|--|--|--|--|--|
| | First Year Disbursement | | | | | | | |
| Payable Amount Stage I | First Half Year | Rs.1,86,000/- | Rs.1,86,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor | | | | |
| Payable Amount Stage II | Second Half Year | Rs.1,86,000/- | Rs.1,86,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificates | | | | |
| Payable Amount Stage III | HRA- I | - @8% of total fellowship amount during JRF is Rs. 29,760/- for class Z cities - @16% of total fellowship amount during JRF is Rs. 59,520/- for class Y cities - @24% of total fellowship amount during JRF is Rs. 89,280/- for class X cities | - @8% of total fellowship amount during JRF is Rs.29,760/-for class Z cities - @16% of total fellowship amount during JRF is Rs.59,520/-for class Y cities - @24% of total fellowship amount during JRF is Rs.89,280/-for class X cities | 1.HRA certificate 2.Non Hostelite Certificate or Hostel Fees Receipt Note – HRA amount will be disbursed as per Government of Maharashtra rules & regulation. | | | | |
| Payable Amount | Contingency A – I | Rs. 10,000/- | Rs. 10,000/- | Contingency Certificate Details of expenditure with | | | | |
| Stage IV | Contingency B – I | Rs. 12,000/- | Rs. 12,000/- | original bills. 3. All Utilization certificates | | | | |
| | | Second Yea | r Disbursement | | | | | |
| Payable Amount Stage V | Third Half Year | Rs.1,86,000/- | Rs.1,86,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificates | | | | |
| Payable Amount Stage VI | Forth Half Year | Rs.1,86,000/- | Rs.1,86,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificates | | | | |

| Payable Amount Stage VII | HRA- II | - @8% of total fellowship amount during JRF is Rs. 29,760/- for class Z cities - @16% of total fellowship amount during JRF is Rs. 59,520/- for class Y cities - @24% of total fellowship amount during JRF is Rs. 89,280/- for class X cities | - @8% of total fellowship amount during JRF is Rs.29,760/-for class Z cities - @16% of total fellowship amount during JRF is Rs.59,520/-for class Y cities - @24% of total fellowship amount during JRF is Rs.89,280/-for class X cities | 1)HRA certificate 2)Non Hostelite Certificate or Hostel Fees Receipt. 3)All Utilization certificates Note – HRA amount will be disbursed as per government of Maharashtra rules & regulation. |
|---------------------------------|-----------------------|--|--|--|
| Payable Amount Stage VIII | Contingency A-II | Rs. 10,000/- | Rs. 10,000/- | Contingency Certificate Details of expenditure with original bills. |
| | Contingency B – II | Rs. 12,000/- | Rs. 12,000/- | 3. All Utilization certificates |
| | | Third Yea | r Disbursement | |
| Payable Amount Stage IX | Fifth Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate SRF Up-gradation Certificate Three Member Committee Evaluation Report |
| Payable Amount Stage X | Sixth Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate |
| Payable Amount Stage XI | HRA- III | Not Applicable | - @8% of total fellowship amount during SRF is Rs. 33,600/-for class Z cities - @16% of total fellowship amount during SRF is Rs. Rs. 67,200/- for class Y cities - @24% of total fellowship amount during SRF is Rs. 1,00,800/- for | HRA certificate Non Hostelite Certificate or Hostel Fees Receipt All Utilization certificate Note – HRA amount will be disbursed as per government of Maharashtra rules & regulation. |

| | Ţ | | | 1 |
|------------------------------------|--|----------------|---|--|
| | | | class X cities | |
| Payable | Contingency A – III | Not Applicable | Rs. 20,500/- | Contingency Certificate Details of expenditure with |
| Stage XII | Amount Not Applicable | | Rs. 25,000/- | original bills. 3. All Utilization certificates |
| | | Fourth Ye | ear Disbursement | |
| Payable Amount Stage XIII | Seven Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate |
| Payable Amount Stage XIV | Eight Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate |
| Payable Amount Stage XV | HRA- IV | Not Applicable | - @8% of total fellowship amount during SRF is Rs. 33,600/-for class Z cities - @16% of total fellowship amount during SRF is Rs. 67,200/- for class Y cities - @24% of total fellowship amount during SRF is Rs. 1,00,800/- for class X cities | HRA certificate Non Hostelite Certificate or Hostel Fees Receipt All Utilization certificate Note – HRA amount will be disbursed as per government of Maharashtra rules & regulation. |
| Payable Amount Stage XVI | Contingency A – IV Contingency B – IV | Not Applicable | Rs. 20,500/- | Contingency Certificate Details of expenditure with original bills. All Utilization certificates |

| | Fifth Year Disbursement | | | | | |
|-------------------------------------|--|----------------|---|--|--|--|
| Payable Amount Stage XVII | Nine Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate | | |
| Payable Amount Stage XVIII | Ten Half Year | Not Applicable | Rs.2,10,000/- | Half Yearly Progress Report Continuation Certificate Monthly Attendance Sheet Certified by Supervisor All Utilization certificate | | |
| Payable Amount Stage XIX | HRA- V | Not Applicable | - @8% of total fellowship amount during SRF is Rs. 33,600/-for class Z cities - @16% of total fellowship amount during SRF is Rs. Rs. 67,200/- for class Y cities - @24% of total fellowship amount during SRF is Rs. 1,00,800/- for class X cities | HRA certificate Non Hostelite Certificate or Hostel Fees Receipt All Utilization certificate Note – HRA amount will be disbursed as per government of Maharashtra rules & regulation. | | |
| Payable Amount Stage XX | Contingency A – V Contingency B – V | Not Applicable | Rs. 20,500/- Rs. 25,000/- | 1. Contingency Certificate 2. Details of expenditure with original bills. 3. All Utilization certificates | | |

RELEASE OF LAST INSTALLMENT:

The last 6 months Installment will be released only after the submission of research thesis &Completion Certificate to BARTI.

Additional "6 months" period (without fellowship benefits) will be given for thesis submission after completion of academic tenure of the concerned University for

M.Phil. candidates, failing which the last '6 months' fellowship amount (Payable Amount Stage VI, VII & VIII) will not be disbursed.

FORMAT TO CLAIM BENEFITS UNDER BANRF-2019 FELLOWSHIP.

1. Joining Certificate: - Annexure -I (A)

Awardee shall submit Joining Report in the prescribed format along with the set of all the required documents to the BARTI office to avail benefits under BANRF-2019 fellowship.

2. Joining Certificate: - Annexure – I (B)

In case awardee holding a job during the period from Date of registration to Date of Award, Awardee shall submit Joining Report - I (B) in the prescribed format separately along with Resignation letter/ Relieving letter / Experience certificate etc.

3. Half Yearly Progress Report- Annexure -II

Awardee shall submit Half Yearly Progress Report on completion of 6 months from the date of registration and at the interval of every 6 months till the completion of fellowship tenure.

4. House Rent Allowance (HRA) - Annexure - III

Awardee shall submit House Rent Allowance certificate on completion of 1 year from the date of registration and at the interval of every 1 year till the completion of fellowship tenure along with Non-Hosteller Certificate or Hostel Bill Receipts paid by Awardee in given Performa.

5. Utilization Certificate for Contingency Amount - Annexure -IV

Awardee shall submit account of Contingency certificate on completion of 1 year from the date of registration and at the interval of every 1 year till the completion of fellowship tenure.

6. Up-gradation Certificate- Annexure V

Awardee shall submit Up-gradation certificate on completion of 2 years from the date of registration to Ph.D. along with Three Member Committee Evaluation Report.

7. Extension Certificate - Annexure VI

8. Attendance Certificate - Annexure VII

Monthly Attendance sheet certified by Supervisor/Guide, to be submitted for the period mentioned in the Half Yearly Progress Report.

9. Fellowship/ House Rent Allowance Utilization Certificate - Annexure VIII

- **10. Research proposal /Synopsis** Annexure IX
- **11. Continuation certificate** Annexure X



Research Centre Joining Report – Annexure I-A

| 1. Dr. Babasaheb Ambedkar | National Research | Fellowship (BANRF) - 2019 |
|----------------------------------|-----------------------|---|
| 2. Name of the Awardee: | | |
| 3. Award letter No & Date | | |
| Department of | | which is affiliated to |
| M.Phil. /Ph.D. in the Su | bject (Research tit | University for doing Part time / full time |
| With effect from DD/MM/YYY | | ······································ |
| His/ her date of Registration is | s DD/MM/YYYY | |
| This is to certify that he | e/ she belongs to | category. Awardee is a |
| regular / external student of | the department an | nd he /she was holding / not holding any |
| employment from his date of | ofregistration DD/N | 1MM/YYYY to till date. The total tenure of |
| M. Phil / Ph.D. is | Months/Years wit | chout extension period i.e. with effect from |
| DD/MM/YYYY to DD/MM/YYY | /Y.He/ She will be pr | ovided all the necessary facilities during his/ |
| her tenure of fellowship awa | ard. The terms and | conditions of the offer are acceptable to |
| Awardee. It is also certified | dthat fellow shall n | ot accept / hold any emoluments paid or |
| otherwise or receive emolur | nents, salary, stipe | nd, etc. from any other source during the |
| tenure of the award. | | |
| Signature | Signature | Signature |
| Name of the Candidate: | Name of HOD: | Name: |
| Date: | Date: | Date: |
| | Head of Departme | |
| | (Seal/Stamp) | (Seal of University / Institution |
| Counter Sign by Guide/ | | /College) Date: |
| Supervisor (Seal/Stamp) : | | Place: |



Supervisor (Seal/Stamp):

DR. BABASAHEB AMBEDKAR RESEARCH & TRAINING INSTITUTE (BARTI), PUNE

1. Dr. Babasaheb Ambedkar National Research Fellowship (BANRF) - 2019

2. Name of the Research Scholar:

Fellowship joining Report - Annexure-I-B

| 3. Award letter No & Date | | |
|---------------------------------|-----------------------------------|---|
| 4. Fellowship Awarded for: N | 1.Phil. / Ph.D. | |
| This is to certify that, | he/she has been awarded | BANRF - 2019 by Dr. Babasaheb |
| Ambedkar Research & Trainin | g Institute, Pune with effectiv | e from the date of registration i.e. |
| DD/MM/YYYY. | | |
| However, he/she was | an external / part time | student of the department of |
| fr | om DD /MM /YYYY to DD | /MM /YYYY due to holding an |
| | | said period for which he/she was |
| | • | ure of the fellowship. Hence, he/ |
| she is joining BANRF -2019 fel | | • • • • |
| , , | | |
| The documents attached with | | |
| 1. Resignation letter copy | | |
| 2. Relieving certificate from | om organization | |
| He/ She will be provided with a | all necessary facilities during h | is/ her tenure of award. The terms |
| and conditions of the offer are | e acceptable to Awardee. It is | also certified that fellow shall not |
| accept / hold any emoluments | s paid or otherwise or receive | emoluments, salary, stipend, etc. |
| from any other source during | the tenure of the award. | |
| | | |
| Signature | Signature | Signature |
| Name of the Candidate: | Name: | Name: |
| Date: | Date: | Date: |
| | Head of Department | Registrar / Director / Principal: |
| | (Seal/Stamp) | (Seal of University / Institution / College |
| | | |
| | | |
| Counter Sign by Guide/ | | |



Half Yearly Progress Report - Annexure- II

| 1. | Nar | me of the Fe | llowship: C | r. Baba | asah | eb Ambe | dkar Nati | onal Resear | ch Fellows | hip |
|-----|------|-----------------|--------------------|---------|-------|------------|------------------|-------------|-------------|------------|
| 2. | Yea | r of the Fell | owship: 20 | 19 | | | | | | |
| 3. | Nai | me of the Fe | llow: | | | | | | | _ |
| 4. | Aw | ard letter ทเ | umber and | date: - | | | | | | |
| 5. | Dat | e of Registra | ation with | the Uni | vers | ity: DD/N | IM / YYYY | | | |
| 6. | Sub | ject: | | | | | | | | |
| 7. | Top | oic / Title of | Research:_ | | | | | | | |
| | | | | | | | | | | |
| 8. | Naı | me of the Gu | uide/ Supe | visor:_ | | | | | | |
| | | a. Email ID | of Guide/ | Superv | isor | : | | | | |
| | | b. Mobile | No.: | | | | | | | |
| 9. | Per | iod of Progr | ess Report | from D | D/N | /IM/YYYY | to DD/MN | Л/YYYY. | | |
| 10. | Tot | al number o | of working (| days du | ring | the perio | d (month | -wise) | | |
| | | Months | | | | | | | | |
| | | Working Days | | | | | | | | |
| | a) | With fellow | ship, numb | er of d | ays: | | | · | | |
| | | from DD/M | M/YYYY to | DD/MI | VI/Y | YYY. | | | | |
| | b) | Without fel | lowship, nı | umber d | of da | ays: | | - | | |
| | | from DD/N | 1M/YYYY to | DD/M | M/Y | YYY. | | | | |
| Sig | natu | ure of Guide | / Superviso | or | Sigr | nature of | Student | Date: | | |
| Na | me (| of Guide/ Su | pervisor: | ı | Nam | ne of Stud | ent | Guide/ Sup | ervisor (Se | al/Stamp): |

| _ | | | | | versity/Institution/ College: |
|-------|---------------------------------------|------------|-----------------------|-----------|-------------------------------|
| | umber of days the Fel ace visited: | low remair | ned out of station fo | or fieldv | vork / travel with dates and |
| | Number of days | Travel da | ates (from – to) | | Places visited |
| | | | | | |
| | | | | | |
| | | | | | |
| Sr. | Type of Field wor | k Done | Details | | Remarks of Guide |
| | | | | | |
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| | | | | | |
| | Please attach a Plar | of action | with the progress I | Report. | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Signa | ture of Guide/ Superv | isor S | Signature of Studen | it Dat | e: |
| Name | e of Guide/ Supervisor | : N | ame of Student | Gui | de/ Supervisor (Seal/Stamp): |
| | | | | | |

| | oks & Journals (Reference & c | | | |
|---|-------------------------------|------------------------|---------------------------------|--|
| (Pleas | e attach separate attachmen | t if require) | | |
| 14. Cor | nferences / Seminars attende | d on relevant subject: | Status(International, | |
| Sr. | Title of Paper | Venue | National, State) | |
| | | | | |
| PLEASE ATTACH A PAPER AND CERTIFICATE COPY WITH THE PROGRESS REPORT | | | | |
| Signatu | ure of Guide/ Supervisor | Signature of Student | Date: | |
| Name (| of Guide/ Supervisor: | Name of Student | Guide/ Supervisor (Seal/Stamp): | |

15. Chapters Completed:

| Sr. | Chapter Title | Completed or Under Completion | Status | Remarks of Guide |
|-----|---------------|----------------------------------|-----------------|------------------|
| | | | 1. Rough Draft | |
| | | | 2. Approved | |
| | | | 3. Final Typing | |
| | | | | |

Please attach a summary sheet with the progress report.

16. Title of the article / paper published during the period under report:

| Sr. no. | Paper / Article's Title | Whether Published / or Not | Name of journal / Magazine & Vol. No. | Place |
|------------|----------------------------|----------------------------------|--|-------|
| | | | | |
| | | | | |
| | | | | |

Please attach hard copies of Article with the Progress report.

| Signature of Guide/ Supervisor | Signature of Student | Date: |
|--------------------------------|----------------------|-------|
|--------------------------------|----------------------|-------|

Name of Guide/ Supervisor: Name of Student Guide/ Supervisor (Seal/Stamp):

| 17. Title of monograph written during the p | period under report: | |
|--|--|--|
| 8. Teaching work done during the period under report: | | |
| A. Number of periods taken per week in | n graduate course | |
| B. Number of periods taken per week in | n post graduate course | |
| 9. Detailed account of the work done during the period (A separate sheet may attach for the purpose) | | |
| | | |
| period under report (Minimum Two Lines): | | |
| person and a special (| ,- | |
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| | | |
| 6: | Signature | |
| Signature | Name: | |
| Name of the Candidate: | Date: | |
| Date: | Guide/ Supervisor (Seal/Stamp): | |
| | | |
| | | |
| | | |
| Signature | Signature Name: | |
| Name of HOD: | Date: | |
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| | | |
| Date: Head of Department (Seal/Stamp): | Registrar / Director /Principal: (Seal of University / Institution /Colleg | |
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House Rent Allowance (HRA) Certificate - Annexure-III

| 1 | Dr. Babasaheb Ambedkar National Research Fellowship (BANRF- 2019) | | |
|--|---|--|--|
| 2 | Name of the Fellow: | | |
| 3 | Award letter No & Date | | |
| 4 | M.Phil. / Ph.D. Registration date: DD/MM/YYYY | | |
| 5 | HRA claim for the period: - DD/MM/YYYY to DD/MM/YYYY (For 1 year) | | |
| 6 | Full address of Research Centre with name of the City – | | |
| 7. | House Rent Allowance (HRA) in Percentage (%) for City – | | |
| | Certificate No 1 | | |
| Т | nis is to certify that, Mr./Mrs./Missis paying | | |
| house re | nt of Rsper month or staying at his/her parents' or own | | |
| house and is eligible to draw House Rent Allowance (HRA) as per rules. | | | |
| | OR | | |
| | Certificate No 2 | | |
| T | nis is to certify that Mr./Mrs./Miss has | | |
| been pro | ovided accommodation facility in the College /Institute /University hostel from | | |
| DD/MM/ | YYYY to DD/MM/YYYY. Hostel fee charges @ Rs per Month/Half | | |
| Year/Yea | r is being charged from him/ her, so he/ she is eligible to draw hostel fees as House | | |
| Rent Allo | wance as per rules. | | |
| To | es Receipt No: Date of payment: cal Amount Paid (in Digits) words | | |
| Fed | es paid for the period of DD/MM/20to DD/MM/20 | | |

Signature

Signature Name: Name of the Candidate: Date:

Date: Guide/ Supervisor (Seal/Stamp):

Signature

Signature Name: Name of HOD: Date:

Date: Registrar / Director / Principal:

Head of Department (Seal/Stamp): (Seal of University / Institution /College)

Note -

- 1. HRA will be paid as per Government Rules & location of research Centre/Institute.
- 2. Please find attached enclosure separately for Non Hosteller Certificate Duly Signed & sealed by Hostel Warden / Rector/ HOD & Research Guide
- 3. Deposit Amount is not payable by BARTI.
- 4. Please Attach Original Hostel Fees Receipts along with HRA Certificate in case availing hostel facility
- 5. If, as a result of check or audit objection, some irregularity is noticed at a later stage, action will be taken to refund, adjust or regularize the objected amount

Non Hosteller Certificate should be printed on Institute / College / University letterhead

Non Hosteller Certificate

| This is to o | ertify that, Mr. /Miss./ Mrs | is |
|--------------------|--|-----------------------|
| pursuing M.Phil. / | Ph.D. from | He/she |
| has not been avail | ing accommodation or /hostel facility provided | by College /Institute |
| /University w.e.f. | DD/MM/YYYY to DD/MM/YYYY. | |

Verified and Approved by Hostel Warden / Rector/ HOD Signature with Seal

Signature of Research Fellow

Signature & stamp of Research Guide



<u>Utilization Certificate for Contingency Amount - Annexure-IV</u>

| 1. Dr. Babasah | eb Ambedkar National Re | search Fellowship (BANRF) - 2019 |
|---------------------|---------------------------|---|
| 2. Name of the | Fellow: | |
| 3. Award letter | No & Date | |
| 4. Date of Reg | istration : DD/MM/YY | YY |
| 5. Duration of | Expenditure : DD/MM/YY | YYY to DD/MM/YYYY |
| This is to ce | rtify that, Mr./Miss/Mrs | , |
| has received contin | gency amount Rs | (in words) |
| |) on date | from BARTI under Dr. Babasaheb Ambedkar |
| National Research I | Fellowship (BANRF) - 2019 | |

The received contingency amount has been utilized for the purpose of said research only or for which it was sanctioned in accordance with the terms and conditions laid down by the BARTI, Pune. Details of expenditure in respect to Contingency Grant is as below.

| Sr. No | Details | Bill No. & Date | Amount |
|-----------|--|-----------------|--------|
| 1 | Books and allied items | | |
| 2 | Typing (Tracing & ammonia printing) | | |
| 3 | Stationery | | |
| 4 | Postage | | |
| 5 | Chemical and electrical/electronic goods | | |
| 6 | Travel/fieldwork | | |
| | Total | | |

| If, as a result of check or audit objection, some irregularity is noticed at a later stage, | | |
|---|---|--|
| action will be taken to refund, adjust or regularize the objected amount. | | |
| | | |
| | | |
| Cinnakuus | Cirmotomo | |
| Signature Name of the Candidate: | Signature | |
| Date: | Name of Guide/ Supervisor: Date: | |
| Date. | Seal: | |
| | Seai . | |
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| | | |
| | | |
| | | |
| Signature | Signature | |
| Name of HOD: | Name: | |
| Date: | Date: | |
| Head of Department (Seal): | Registrar / Director /Principal :(Seal of | |
| . , | University / Institution / College) | |
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Up-gradation Certificate - Annexure-V

THREE MEMBERS ASSESSMENT COMMITTEE REPORT FOR UPGRADATION FROM BANJRF TO BANSRF UNDER THE SCHEME OF DR. BABASAHEB AMBEDKAR NATIONAL RESEARCH FELLOWSHIP, BARTI, PUNE

| 1. Dr. Babasaheb Ambedka | ar National Research Fellowship (BANRF- 20 | 19) | | |
|--------------------------------|---|-----------|----|-----|
| 2. Award letter No & Date . | | | | |
| Assessment for up-gradation | of Mr./Mrs | _working | at | the |
| Department of | of University/Institution/College | | | _on |
| completion of two years on dat | e DD/MM/YYYY. | | | |
| CONSTITUTION OF THE COMM | ITTEE | | | |
| (Name and Designation of the p | panel) | | | |
| 1. [1 Outside Subject Expert – | other than same University/ Institute/College | e] | | |
| 2. [Supervisor of Research Sch | olar] | | | |
| 3. [Head of the Department] | | | | |
| Ph.D. Registration No.: | | | | |
| Ph.D. Registration Date: DD/MI | M/YYYY | | | |
| Date of Joining: DD/MM/YYYY | | | | |
| Tenure of JRF completed DD/N | /IM/YYYY to DD/MM/YYYY (2 year) | | | |
| VENUE OF ASSESSMENT/ INTE | RVIEW: - | | | |
| Venue of Meeting | | | | |
| Date of Meeting: - DD/MM/YYY | Y Time: - | | | |
| ASSESSMENT OF THE COMMIT | TEE | | | |
| The Committee assessed the pr | ogress of the candidate through his/her pres | sentation | | |
| followed by interview and reco | mmended as follows. | | | |

RECOMMENDATIONS

| Mr./ Mrs./Ms |
|--|
| research work is found outstanding/very good/ satisfactory. Signature Signature Date: Date: Name of the Candidate: Signature Guide/ Supervisor (Seal/Stamp): Signature Signature Name: Date: Date: Signature Date: Date: |
| Signature Date: Date: Name of the Candidate: Signature Signature Name: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: |
| Signature Date: Date: Name of the Candidate: Signature Signature Name: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: |
| Signature Date: Date: Name of the Candidate: Signature Signature Name: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: |
| Signature Date: Date: Name of the Candidate: Signature Signature Name: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: |
| Date: Name of the Candidate: Guide/ Supervisor (Seal/Stamp): Signature Signature Name: Date: |
| Name of the Candidate: Guide/ Supervisor (Seal/Stamp): Signature Name: Date: |
| Signature Name: Date: |
| Signature Name: Name: Date: |
| Signature Name: Name: Date: |
| Signature Name: Name: Date: |
| Signature Name: Name: Date: |
| Name: Date: |
| |
| Date: Registrar / Director / Principal: |
| |
| Head of Department (Seal/Stamp): (Seal of University / Institution / College) |
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Three Member Committee Evaluation Report should be printed on Institute / College / University letterhead

| 1. Dr. Babasaheb Ambedkar National Research Fellowship (BANRF- 2019) |
|--|
| 2. Name of Fellow |
| 3. Award letter No & Date |
| 4. Ph.D. Registration date: DD/MM/YYYY |
| 5. Name of Department |
| 6. Name of Research Centre |
| 7. Name of University |
| |

(Three Member Committee should provide detail report for JRF (2 years) period with respect to following points)

- Course Work Completion Status
- > Research proposal
- > literature review
- Research methodology design
- Data collection tool design
- Data collection process
- > Research paper presentation & publication
- Poster presentation
- ➤ Participation in seminars, conferences & workshops
- Benefit to society
- > Any other tasks related to research topic.

| Mr./ Mrs./Ms | may be upgraded from |
|---|--|
| BANJRF to BANSRF for the Period of one year, w | e.e.f. DD/MM/YYYY to DD/MM/YYYY as his/her |
| research work is found outstanding/very good/ | satisfactory. |
| Signature | Signature |
| Name of Head of Department: | Name of Guide/Supervisor – |
| Date: | Date: |
| Seal or Stamp of HOD - | Seal or Stamp of Guide/Supervisor |
| | |
| | |
| Signature | |
| Name of Outside Subject Expert (Other than same University/Institute/College) |) |
| Date | |
| Seal or Stamp of | |
| Seal or Stamp of | |
| | |



Extension Certificate - Annexure-VI

| 1. Dr. Babasaheb Ambedkar National Research I | ellowship (BANRF- 2019) |
|--|--|
| 2. Award letter No & Date | |
| 3. M.Phil. / Ph.D. Registration date: DD/MM/Y | YYY. |
| 4. Extension given for the period of: - DD/MM/Y | YYYY to DD/MM/YYYY |
| This is to certify that, Mr./Miss/Mrs | has joined the |
| Department of & I | his / her research centre is |
| | which is affiliated to |
| Univ | |
| M.Phil. /Ph.D. in the Subject (Research | title) of |
| The research scholar has completed | |
| reason for extension) | |
| he/she needs Months /Year more than her ac | ademic tenure. |
| The Department has given extension for | the period from DD/MM/YYYY to |
| DD/MM/YYYY to complete his/her remaining researc | h work. He/she is fully aware & agreed |
| that, No fellowship benefits will be provided during | |
| | |
| Signature | Signature |
| Name of the Fellow: | Name: |
| Date: | Date: |
| | Guide/ Supervisor : |
| | Signature |
| Signature | Name: |
| Name of HOD: Date: | Date: Registrar / Director / Principal: |
| Head of Department (Seal): | (Seal of University / Institution / College) |



Attendance Sheet - Annexure -VII

| 1. | Dr. Babasaheb Ambedkar National Research Fellowship (BANRF- 2019) | | |
|---------------|---|--|--|
| 2. | Name of the Fellow: | | |
| 3. | Award letter No & Date: | | |
| 4. | M.Phil. / Ph.D. Registration Date: DD/MM/YYYY | | |
| 5. | Name of Research Centre: | | |
| 6. | Name of Department: | | |
| 7. | Period of Attendance: DD/MM/YYYY to DD/MM/YYYY | | |
| Depart | This is to certify that, Mr./Miss/Mrshas joined the tment of | | |
| M.Phil | | | |
| Mont | ths | | |
| No. o work | | | |
| a) b) | With fellowship, number of days: from DD/MM/YYYY to DD/MM/YYYY. Without fellowship, number of days: from DD/MM/YYYY to DD/MM/YYYY. | | |

Signature

Name of the Fellow:

Date:

Signature

Name:

Date:

Guide/ Supervisor :

Signature

Signature Name: Name of HOD: Date:

Date: Registrar / Director / Principal:

Head of Department (Seal): (Seal of University / Institution / College)



2

House Rent Allowance

Total

DR. BABASAHEB AMBEDKAR RESEARCH & TRAINING INSTITUTE (BARTI), PUNE

Fellowship / House Rent Allowance Utilization certificate - Annexure- VIII

| 1. Dr. Babasaheb Ambedkar National Research Fellowship (BANRF) - 2019 | | | | | |
|---|--|---|--------|--|--|
| 2. | Name of the Fellow: | | | | |
| 3. | Award letter No. & Date | | | | |
| 4. | Date of Reg | gistration : DD/MM/YYYY | | | |
| 5. | Duration of | Duration of Expenditure: DD/MM/YYYY to DD/MM/YYYY | | | |
| | This is to certify that, Mr./Miss/Mrs, | | | | |
| has received fellowship/ House Rent Allowance amount as per below on date DD/MM/YYYY | | | | | |
| from BARTI under Dr. Babasaheb Ambedkar National Research Fellowship (BANRF) – 2019. | | | | | |
| The received fellowship/ House Rent Allowance amount has been utilized for the | | | | | |
| purpose of said research only or for which it was sanctioned in accordance with the terms and | | | | | |
| conditions laid down by the BARTI, Pune. Details of expenditure in respect to fellowship/ | | | | | |
| House Rent Allowance is as below. | | | | | |
| | Sr. No | Details | Amount | | |
| | 1 | Fellowship Amount | | | |

If, as a result of check or audit objection, some irregularity is noticed at a later stage, action will be taken to refund, adjust or regularize the objected amount.

Signature Signature

Name of Candidate: Name of Guide/Supervisor:

Date Date

Seal:

Signature Signature
Name of HOD: Name:
Date: Date:

Head of Department (Seal) Registrar/ Director/Principal :(Seal of

University / Institution / College



Research proposal /Synopsis - Annexure - IX

| Candidate Name:- | |
|------------------------|--|
| M.Phil. / Ph.D.:- | |
| Subject of Research:- | |
| Research Centre:- | |
| University Name :- | |
| Date Of Registration:- | |
| Guide Name :- | |
| Department:- | |
| HOD :- | |
| | |
| Research Title:- | |
| | |

Format for Preparing a Research Proposal-

The Title of the project should be concise (with sub-title, if any) reflecting the scope of the investigation.

| Aim of the Project: | The broad aim of the project should be clearly mentioned. | | |
|--------------------------------------|--|--|--|
| Statement of the Problem: | The problem to be investigated should be clearly contextualized in the theoretical framework of the discipline | | |
| Overview of Literature: | The problem identified should be logically linked to other studies on the subject in the literature. | | |
| Significance of the study: | Explain the need for the present investigation. | | |
| Conceptual Framework: | The concepts to be used, their relevance and applicability to the study and their operationalization should be indicated. | | |
| Research Questions or Hypotheses: | The research questions to be answered/ addressed need to be clearly stated. | | |
| Research Methodology :- | | | |
| (a) Coverage: | The proposal should clearly indicate the universe of the study, sampling frame, sampling methods, sampling size, units of observation etc. | | |
| (b) Data Collection: | The proposal should indicate sources of data, types of data, tools and techniques for collection of various categories of proposed data. | | |
| (c) Data Analysis: | It should indicate the statistical techniques, if any, proposed to be used in data processing, specific packages for data analysis, content analysis, indices/scaling techniques proposed to be used etc. | | |
| Implications: | The proposal should state whether this research would bring forth any suggestions for policy making either for the region concerned or the country, any methodological innovations or contribute to theory building. | | |
| Plan of Research: | Tentative Timeline | | |
| References: | The proposal should include a 'List of References' mentioned in the text along with other important recent additions to the literature on the theme. The references should indicate the author, title, publisher and year of publication. | | |

Instruction:

- 1. The expected length of the research proposal should be in 6 to 8 A-4 size pages.
- 2. The Details of researcher & topic should be printed on the cover page of the research Proposal.
- 3. Candidate should not mention his/her name, Department, University or any other information anywhere on research proposal, except cover page.
- 4. The Research Proposal can be submitted in English /Marathi/ Hindi language.



Continuation certificate - Annexure - X

| 1. | 1. Dr. Babasaheb Ambedkar National Research Fellowship (BANRF- 2019) | | | | |
|---|--|--|--|--|--|
| 2. | 2. Award letter No & Date | | | | |
| 3. | 3. M.Phil. / Ph.D. Registration date: DD/MM/YYYY | | | | |
| 4. | I. Research Centre | | | | |
| 5. | University | | | | |
| | This is to certify that Mr./Mrs./Miss | | | | |
| has continuously working in the subject ofin the Department | | | | | |
| under the above scheme for the period from DD/MM/YYYY | | | | | |
| to DD/MM/YYYY. | | | | | |
| | | | | | |
| Signa Nam Date | e of the Candidate: | Signature Name: Date: Guide/ Supervisor : | | | |
| Signa Nam Date Head (Seal | e: : d of Department | Signature Name: Date: Registrar / Director / Principal: (Seal of University / Institution / College) | | | |

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