

Reaccredited with "A" Grade by NAAC PERIYAR PALKALAI NAGAR SALEM - 636 011

Advertisement No. PU/AD3/17430/2016

Applications are invited in the prescribed format for the **University Research Fellowship** for the following Department

Name of the Department	Vacancy	Community
Biochemistry	1	BC-1

Eligibility: Candidates who have passed the Post Graduate degree of this University

or of any other University in Tamilnadu to have a minimum 55% of marks

in their respective subject.

Duration: Two years.

Stipend: Rs.5,000/- per month with Contingency of Rs.5,000/- per year for URF.

Mode of Selection: By written test, interview if necessary.

GENERAL INFORMATION:

- 1. Application form can be obtained from the Registrar by sending a crossed Demand Draft for Rs.200/- drawn in favour of The Registrar, Periyar University, Salem-11, payable at Salem with a self addressed envelope (25cmx12cm) stamped to the value of Rs.40/-
 - An attested copy of permanent community certificate and PG provisional certificate or degree certificate or mark statement of all the semester are to be enclosed.
- 2. The University reserves the right to select or not to select the applicants for URF.
- 3. Applications should be filled in the prescribed form given by the University.
- 4. Applications can also be downloaded from the Periyar University Website www.periyaruniversity.ac.in

THE LAST DATE FOR THE RECEIPT OF FILLED IN APPLICATION IS 05.10.2016 BY 5.00 p.m.

Station: Salem-11 Date: 21.09.2016

REGISTRAR



Affix a Passport
Size
Photograph duly
Attested by a
Gazetted Officer

Reaccredited with "A" Grade by NAAC

Application for University Re	earch Fellowship in the	e Department of
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- 1. Name in full (in BLOCK LETTERS) :
- 2. Father/Mother/Husband Name :
- 3. (a) Date of Birth and Age as on 01.04.2016 (supported by Certificate evidence) :
 - (b) Sex : Male/Female
- 4. Place of Birth and Nativity

(District and State) :

- 5. (a) Nationality / Religion :
 - (b) Community to which the candidate belongs (Attested copy of latest community certificate to be enclosed)

community certificate to be enclosed) : OC/BC/MBC/SC/ST

- 6. Present Address, Phone No. and e.mail ID to which communications should be sent
- 7. Educational Qualifications (H.Sc., U.G and P.G.Degrees):

S.No.	Institutions	Year of	Part Time	Degree	Whether	Class	Specialization
	Studied	Study	or	or	Passed in	or	
			Full Time	Diploma	One	Grade	
					Appearance		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(i)							
(ii)							
(iii)							
(iv)							

(Attach attested copies of Certificates in support of each Degree or Diploma)

8. Teaching, Research and Academic Experience if any

Position	Name of the Institution	Duration			
		From To	Y	M	D
(1)	(2)	(3)	(4)	(5)	(6)
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I certify that the information furnished above are true and correct to the best of my knowledge and belief. If there is any incorrect or false information having been furnished or that may come to light in due course, I find myself for such action as the University may decide.

Signature (Name of the Applicant)

Place:

Date:

List of enclosures:

(1) (4)

(2) (5)

(3) (6)