**INDIAN COUNCIL OF SOCIAL SCIENCE RESEARCH**

Passport Size Photograph

**Format for Profile of Project Coordinator**

**/ Project Director**

**ICSSR Collaborative Empirical Research Project on Jal Jeevan Mission**

*(Note: Insert additional rows wherever necessary)*

|  |  |
| --- | --- |
| **Application Number** **(To be noted down from the online application)** |  |

|  |  |
| --- | --- |
| **Area of Research** |  |

|  |  |
| --- | --- |
| **Title of the Research Proposal**  |  |

**BIODATA OF THE PROJECT COORDINATOR/ PROJECT DIRECTOR**

|  |  |
| --- | --- |
| **1** | **Name of the Project Coordinator/ Project Director (Appointed by the Institute/ Department / Centre)** |
|  | 1. Name:
2. Designation:
3. Department:
4. University
5. Official Address
6. City
7. State
8. Contact No.
9. Email:
 |  |

|  |  |
| --- | --- |
| **2** | **Educational Qualifications** |
|  | *Name of Degree* | *Name of the University* | *Year of Passing/award* | *% of marks* | *Main Discipline* |
| Master’s  |  |  |  |  |
| M. Phil. |  |  |  |  |
| Ph. D. |  |  |  |  |
| Post-Doctoral |  |  |  |  |
| Title of the Ph. D. |  |
| Salient features of Ph.D. (in 100 words) |  |

|  |  |
| --- | --- |
| **3** | **Research Experience** |
|  |  | Number | Title, role/capacity / Presentation / Participation and details of funding Institution |
| a | Research Projects |  |  |
| b | Fellowships |  |  |
| c | Ph.D. Guidance |  |  |
| d | M.Phil. Guidance |  |  |
| e | Seminars / Conferences |  |  |

|  |  |
| --- | --- |
| **4** | **Details of 5 best Research Papers/Books/Chapters (enclose soft copies)** |
|  | *Title of the publication* | *Name of the Journal / Book / Publisher* | *Month, Year and Vol.* | *Scopus / UGC CARE listed? (Yes/No)* |
| a |  |  |  |  |
| b |  |  |  |  |
| c |  |  |  |  |
| d |  |  |  |  |
| e |  |  |  |  |

|  |  |
| --- | --- |
| **5** | **Any other important academic achievement of the Project Coordinator/ Project Director (approx. 150 words)** |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **6** | **Whether Project Coordinator/ Project Director received any financial assistance from ICSSR (mention last 2 awards each of all team members)** | Yes | No |
|  | If yes: |  |
|  | Name of the Award/Scheme |  |
|  | Name of the PC/ PD |  |
|  | Year of Award  |  |
|  | Amount sanctioned |  |
|  | Date of Completion, if completed |  |
|  | Date of Report submission, if submitted |  |
|  | If incomplete, likely date of completion |  |
|  | **(Add / insert additional rows for more information, if required)** |

|  |  |  |  |
| --- | --- | --- | --- |
| **7** | **Whether the Project Coordinator/ Project Director received any financial assistance from any other institution e.g. UGC, ICAR, CSIR, ICPR, ICHR, etc. (mention last 2 awards)** | Yes | No |
|  | If yes: |  |
|  | Name of the Award/Scheme |  |
|  | Name of the PC/ PD |  |
|  | Year of Award  |  |
|  | Amount sanctioned |  |
|  | Date of Completion, if completed |  |
|  | If incomplete, likely date of completion |  |
|  | **(Add / insert additional rows for more information, if required)** |

**Note: Use same form for filling information of entire research team, i.e. Project Coordinator and Project Directors**

**Declaration**

I hereby declare that:

1. I am not a defaulter of any previous ICSSR grant.
2. I have neither been subjected to any disciplinary action nor found guilty of any offence in my career.
3. The Research Proposal and its contents are entirely original as per the standard ethical practices and no AI generated proposal have been submitted to ICSSR.
4. I have not concealed any information in my application. If ICSSR finds any contrary information at any stage, it may cancel the study out rightly and/or impose any penalty as it deems fit.

Place:

Date:

Signature

**Project Coordinator/Project Director**