

**INDIAN INSTITUTE OF TECHNOLOGY (INDIAN SCHOOL OF MINES) DHANBAD****FORM FOR CONTINUATION / ENHANCEMENT OF PMRF SCHOLARSHIP**
(To be submitted annually after the start of PMRF fellowship)

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|----|---|--|---|--|
| 1. | Name of Scholar | | | |
| 2. | Admission No. | | Date of Ph.D Admission (DD/MM/YYYY) | |
| 3. | Department | | Branch (if any) | |
| 4. | PMRF ID | | PMRF Cycle | |
| 5. | Entry Type (Tick anyone) | Direct <input type="checkbox"/> | Lateral <input type="checkbox"/> | |
| 6. | Start Date (DD/MM/YYYY) | | End Date (DD/MM/YYYY) | |
| 7. | Current Year of PMRF program | | Current Rate of fellowship being drawn per month | |
| 8. | Last Review Meeting held on* | | | |
| 9 | Review rating obtained | | | |
| 10 | Proposed scholarship (Tick and mention the fellowship amount) | 1. Continuation of existing fellowship amount 2. Enhancement of existing fellowship amount Amount: _____ | | |

*Attach review report

In undertake that the information provided above is true to the best of my knowledge. In case of any misinformation / overpayment of fellowship amount, necessary financial adjustment may be done from my successive fellowship amount or I will refund the adjustment amount claimed.

Signature of the Scholar with Date

Forwarded by:

Signature of the Supervisor with Date

For Office Use only

| | | |
|--|------------------------------|-----------------------------|
| Checked Fee details | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Verified Assessment Period | From: | To: |
| Verified Fellowship details, if applicable | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Observations, if any | | |

Dealing Assistant

AR (Academic - (PG) / JR (Academic)

Recommended / Not Recommended / Approved / Not Approved

Associate Dean (Academic – PG) / Dean (Academic)