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| **SHODH- ScHeme of Developing High Quality Research** | | | |
| **Application Form for Stipend Refund** | | | |
| SHODH Application Id/Registration No.: | | | |
| 1. | Name of Applicant: |  | |
| 2. | Permanent Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Ta:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Dis:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Pin:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 3. | Contact Details: | (M)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(R) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 4. | Ph.D. Registration No.: |  | |
| 5. | Name of University : |  | |
| 6. | Name of Department : |  | |
| 7. | Ph.D. Subject and Title: |  | |
| 8. | |  | | --- | | Details of Stipend Received:  Amount Received: Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (In words:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)  Received Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Returned Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   Interest to Pay: Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Total Amount to Return (Stipend Amount + Interest amount) : Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  In Words: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  | | --- | --- | | Name of Bank : | Branch: | | Account No.: | IFSC Code: | | | |
| 9. | **Details of Demand Draft** (Full Amount of Stipend) | | |
| In Favour of : **Knowledge Consortium of Gujarat SHODH** | | |
| Demand Draft No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Issuing Bank:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Payable at: Ahmedabad |
| Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Issue Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10. | Reason for Refunding Stipend : | | |
| 11. | Undertaking:  I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the undersigned returning my Stipend amount in total and I know that I will not receive the Stipend under this Scheme in future.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name and Sign of Student)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name and Sign of Ph.D. Guide)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Name and Sign of University Nodal Officer)  Place:  **Date:** | | |