

**TAMILNADU STATE COUNCIL FOR SCIENCE AND TECHNOLOGY  
DOTE CAMPUS, CHENNAI-600 025**

**YOUNG SCIENTIST FELLOWSHIP SCHEME (YSFS) 2019-20**

Aim of the Scheme	:	To encourage young scientists and researchers below 40 years of age to get themselves acquainted with the latest techniques in research and development
Amount of Fellowship	:	Rs.10000/- P.M
Period of Fellowship	:	2 to 6 months
Eligibility	:	The applicant  1. should have Masters degree (or) Ph.D Degree in the respective disciplines  2.should be below 40 years of age  3.should hold a regular position in the parent institution  4.should avail leave with pay from the parent institution during the period of fellowship
Venue of the fellowship	:	Should be a centre of excellence located outside Tamilnadu. The applicant should obtain the consent from the Parent and Host Institution for the training and enclose the same with application.
Travel assistance	:	To and fro from the parent institution to the host institution by shortest route <b>by rail (II AC)</b>
Last date for filing filled up application	:	<b>05.09.2019</b>

**MEMBER SECRETARY**

**TAMILNADU STATE COUNCIL FOR SCIENCE AND TECHNOLOGY**  
**(An Autonomous body under Govt. of Tamilnadu)**  
DOTE Campus, Guindy, Chennai – 600 025.

**Application form for Young Scientist Fellowship Scheme (YSFS)**

Laboratory/Research Institution to be visited\_\_\_\_\_

1. a. Name of the applicant :
- b. Present position and contact address :  
with Telephone, Fax, Mobile No. &  
e-mail id
- c. Age & date of birth :  
(Proof may be enclosed)
2. Educational Qualifications  
(From graduation onwards)

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Degree Obtained	Year	University/ Institution	Any other details/ Remarks
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3. Area of specialization :
  4. Research Experience :  
Publications, if any  
(Please attach the list of your publications)

5. Purpose of the proposed training/research (please tick any one and furnish an abstract of the proposed work) : 

Learning specific techniques	Collaborative research
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6. a. Name of the scientist(s) with whom proposed work is to be carried out. :
- b. Whether the acceptance/ concurrence obtained from the host institution. : 

Yes	No
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If yes, attach copy of acceptance letter and mention the tentative date and duration of proposed training/research
7. Specify the benefit the parent institution will get from your proposed training (may be enclosed separately) :
8. Have you been promised deputation with salary from your parent organization for your proposed visit If yes, please attach a copy of the letter : 

Yes	No
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9. Have you applied earlier/availed this fellowship? If availed give details. : 

Applied	Availed
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10. Do you have any ongoing/completed R&D project?: (If yes, please give details e.g title, cost, duration & sponsoring agency) : 

Yes	No
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11. Have you ever availed any similar fellowship from any other organization ? If yes, furnish the details : 

Yes	No
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12. Name and address of two referees (with contact numbers) : 1.
- 2.

13. Any other relevant facts which have not :  
been covered in the above columns

Place:

Date:

Signature of Applicant

**UNDERTAKING FROM THE PRESENT EMPLOYER**

It is to certify that .....  
.....undertake to depute Thiru/Tmt/Dr.....  
..... of our Institution to undergo the Young Scientist Fellowship Training of TNSCST,  
Chennai at..... for a period of .....months from..... to..... and  
further we undertake to treat his/her absence as on duty and to pay the salary to the individual and to handle  
the fellowship, TA etc attached with the scheme

Signature of the Head of the  
Institution/Controlling authority  
with Date & Seal

(Application with relevant enclosures may be sent to “The Member Secretary, Tamilnadu State Council for  
Science and Technology, DOTE Campus, Chennai – 600 025” on or before 05.09.2019)