

# Indian Institute of Technology Delhi Continuing Education Programme

Hauz Khas, New Delhi - 110 016

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Web: <http://ceqip.iitd.ac.in>



## Application Form Summer Faculty Research Fellow Programme - 2025

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Department: \_\_\_\_\_

Institution/College with Address: \_\_\_\_\_

Pin Code: \_\_\_\_\_

Address for Correspondence: \_\_\_\_\_

Pin Code: \_\_\_\_\_

Mobile No.: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: (Male/Female) \_\_\_\_\_

Please affix a recent passport size photograph

### Qualification (in reverse chronological order)\*

Degree	Branch Specialization	Year of passing	College/University Institution	% of marks obtained

### Total Experience (in reverse chronological order)\*

Name & Address of Employer & Institution	Duration			Designation
	From	To	Years-Months	

\* *(Please feel free to attach a separate sheet in case of insufficient space)*

Have you attended any SFRF programme in the past? (Yes/No) \_\_\_\_\_

If yes give details \_\_\_\_\_

Any other Information: \_\_\_\_\_

**Area of Interest:** \_\_\_\_\_

<b>Name of the Faculty Mentor from IIT Delhi</b>	1)	
	2)	
	3)	
	4)	

**Accommodation required?** Yes/No \_\_\_\_\_

**Declaration:**

I \_\_\_\_\_ declare that all the information given by me in the application form is correct.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

**Signature of Applicant**

**NO OBJECTION CERTIFICATE**

Ms./Mr. \_\_\_\_\_ working as \_\_\_\_\_ in the  
Deptt./Centre of \_\_\_\_\_ at \_\_\_\_\_

\_\_\_\_\_ is hereby  
permitted to attend the Summer Faculty Research Fellow Programme - 2025 (SFRF-2025).

This Institute/College has no objection for attending full time research work by above faculty at IIT Delhi  
under SFRF Programme from \_\_\_\_\_ to \_\_\_\_\_.

**Signature & Seal of Head of the Institution/College**