

**Human Resource Planning and Development
Indian Council of Medical Research**

UNDERTAKING FORM (Financial Support for MD/MS/DM/MCh/DNB/DrNB/MDS, dissertation/Thesis)

UNDERTAKING (Through Proper Channel)

I.....Post Graduate Resident from Department of
.....have been pursuing for the MD/MS/DM/MCh/DNB/DrNB/MDS,
dissertation/Thesis. Entitled"....."under the supervision of
.....

1. I submit the Undertaking to the effect that the funds received from the ICMR will be used strictly for the purpose for which it has been released. If leaving this in between scheme the whole amount will be remitted to the ICMR with suitable justifications. I shall be providing one electronic copy, hard copy & summary of my dissertation/ thesis along with publication from the thesis work to Indian Council of Medical Research, New Delhi
2. The duration of the award valid for a period of three years and six months from the date of issue of award letter.
3. The 2nd installment of Rs. 20,000/- will be released after receiving the copy of publication in an indexed journal.

Signature of the Research Fellow/ with date

Name of Supervisor/guide:

Email address of Supervisor/guide:

With official seal & Date

Dean/ Head of the Institute