UNIVERSITY OF KALYANI

NOTIFICATION

Applications are invited in the prescribed format from eligible candidates enrolled in the **Ph.D. Programme** under different Departments of the University of Kalyani for award of the **University Research Fellowship.**

The fellowship is funded by the Government of West Bengal vide **G.O. No. 01(19)-Edn(U)/1U-10/94,** dated **04 January 2016,** Kolkata. The fellowship amount is a consolidated **Rs. 18,000/- per month for Junior Research Fellow (JRF) and Rs. 20,000/- per month for Senior Research Fellow (SRF).**

Eligibility:-

1. Enrolment in the Ph.D. Programme under the University of Kalyani.
2. Successful qualification in **NET/GATE/SET** examination.
3. Master's Degree with at least **55% marks in aggregate** (relaxation as per UGC Rules).

Other Important Terms & Conditions:-

1. No House Rent Allowance (HRA) will be admissible.
2. No contingency grant will be provided to the individual fellow.
3. The tenure of the fellowship shall be **four (4) years**, extendable by **one additional year** only in deserving cases.

Vacancies as per the followings:-

Sl. No.	Name of the Department	Name of the faculty to whom the URS will be allotted	Total number of the required position of URS of Concerned Department
1	Ecological Studies	Dr.Sushil Kumar Mandal	1
2	History	Prof.Sutapa Sengupta	2
		Dr.Subhas Biswas	
3	Physics	Prof.Subhratanu Bhattacharyya	1
4	Zoology	Dr.Kakali Bhadra	2
		Dr.Laishram Pradeep Kr. Singh	
5	Physical Education	Prof.Saikot Chatterjee	1
6	Microbiology	Dr.Ekramul Islam	1
7	Biochemistry & Biophysics	Prof.Utpal Ghosh	2
		Prof.Jishu Naskar	
8	Molecular Biology and Biotechnology	Prof.Utpal Basu	1
9	Computer Science & Engineering	Prof.PriyaRanjan Sinha Mahapatra	3
		Prof.Utpal Biswas	
		Dr.Debabrata Sarddar	

P.T.O

10	Chemistry	Prof.Manindranath Bera	5
		Prof. Tapas Majumdar	
		Prof.Swarup Chattopadhyay	
		Dr.Nitis Chandra Saha	
		Dr. Sk. Imran Ali	
11	Commerce	Prof.Biswambhar Mandal	1
12	Education	Prof.Tarini Halder	2
		Prof.Santinath Sarkar	
13	VisualArts	Dr.Ritendra Roy	1
14	Philosophy	Dr.Kuheli Biswas	1

The selected fellows shall generally be governed by the **UGC Guidelines**, unless the Department of Higher Education, Government of West Bengal, issues any revised or additional rules governing this fellowship.

The completed application in the prescribed format, along with all requisite documents duly attested by the Head of the Department, must be submitted to the Office of the respective Head of the Department on or before 14.08.2026.

Sd/-
Registrar

Copy forwarded for information & necessary action to: -

No./Advt./URS/2026/2P-485 **Dated: 03.08.2026**

1. The Hon'ble Vice-Chancellor, K.U. (For his kind information)
2. The Deans of all Post Graduate Faculties, University of Kalyani.
3. All Heads of the Academic Department, University of Kalyani.
4. The Finance Officer, University of Kalyani.
5. Development Officer, University of Kalyani.
6. System-in-Charge, CIRM, K.U.(with a request to upload the notification in University website.)

03/08/26

Registrar

REGISTRAR
University of Kalyani
Kalyani-741235, Nadia
West Bengal

UNIVERSITY OF KALYANI

Attach recent Photograph

APPLICATION FORM FOR UNIVERSITY RESEARCH FELLOWSHIP (URS)

(The application form must be filled in carefully. Incomplete applications are liable to be rejected.)

1. Name of the Applicant (in Block Letters)

2. Department (in which enrolled for Ph.D.)

3. Name of the Ph.D. Supervisor:

4. Date of Birth(Enclose self-attested photocopy of Madhyamik/Secondary (Class X) Admit Card or Certificate) : ___ / ___ / _____

5. Nationality:

6. Category (Tick ✓ the appropriate box)

☐ General (GEN) ☐ SC ☐ ST ☐ OBC ☐ EWS ☐ PwD

7. Communication Address:

PIN Code: _____

8. E-mail ID :

9. Mobile / Contact Number :

10. Whether enjoying any Fellowship/Scholarship at present?

☐ No ☐ Yes (If yes, furnish details)

11. EDUCATIONAL QUALIFICATION (Please enclose attested photocopies of mark sheets)

Examinations	Yearof Passing	Board/University	Division/ Grades	% of Marks

P.T.O

12. Ph.D. Enrolment / Registration(Please enclose a self-attested copy of the Ph.D. Enrolment/Registration Certificate.)

Ph.D. Registration / Enrolment No.: _____ **Date:** _____

13. Details of Qualifying NET/GATE/SET Examination

Name of Examination: _____

Roll Number: _____

Year of Qualification: _____

Subject: _____

(Please enclose a self-attested photocopy of the qualifying certificate.)

Declaration

I hereby declare that the information furnished above is true and correct to the best of my knowledge and belief. I understand that if any information furnished by me is found to be false or incorrect at any stage, my candidature is liable to be cancelled.

Date: _____

Place: _____

Signature of the Applicant

Forwarding by the Ph.D. Supervisor

Certified that the above particulars have been verified and found correct. I recommend the candidature of the applicant for the award of the University Research Fellowship.

Date: _____

Signature of the Ph.D. Supervisor with Stamp

Forwarding by the Head of the Department

The application has been verified and is hereby forwarded with recommendation for consideration.

Date: _____

Signature of the HoD with Stamp