

F. No. 12-1/2018-ES.3
Government of India
Ministry of Human Resource Development
(Department of Higher Education)

ISRAEL GOVERNMENT SCHOLARSHIPS 2019-20

LAST DATE OF ONLINE APPLICATION:- 30.11.2018

Online applications are invited under Israel Government Scholarship 2019-20. 5 scholarships is for a duration of 8 months, to undertake research/specialization, from the universities which are approved by the Israeli Council for Higher Education and two short term (summer school) scholarships for the students seeking to study Hebrew.

Link for online application : <http://proposal.sakshat.ac.in/scholarship/>

(Note: Only online application is invited. No other mode of application will be considered. Applicants need not to send the print out of their application.)

Number of Scholarships award : 07 [including two short term (summer school) scholarships for pursuing Hebrew language & literature].

2. Applications are invited for the following subjects:

- (i) Comparative Study of Religions (with specific reference to Judaism)
- (ii) Middle East Studies
- (iii) Hebrew language and literature
- (iv) History of the Jewish people
- (v) Agriculture
- (vi) Biology
- (vii) Biotechnology
- (viii) Economics
- (ix) Business Management
- (x) Mass Communication
- (ix) Environment Studies
- (xii) Chemistry

3. Eligibility:

- **Candidates who have the letter of acceptance from the supervisor/Israeli university is only eligible to apply.**
- **Age:** There is no upper age limit for applying for the scholarship.



- **Qualification: (as on 30.11.2018)**

- i) For research/specialization in the field of Agriculture, Chemistry, Biology, Biotechnology, Environment Studies, Economics, Business Management and Mass Communication, applicant must have Master's degree in the relevant field.
- ii) For Hebrew Language and Literature Course: Student pursuing the post-graduate course in this subject may apply.

Others:

- i) Candidates who have already been abroad for studies/training/ specialization either on scholarships or on their own, for a period exceeding six months are eligible to apply, if they have been in India for at least two consecutive years after returning from abroad as on 30.11.2018.

- ii) Applications of candidates who are staying abroad will not be considered.

- **Basic requirement:**

- i) Proof of English or Hebrew Language proficiency is a must.

4. **Value of Scholarship:**

- Terms and conditions of the scholarship are in accordance to the yearly budget of Israel Government for this purpose.
- The scholarship could be partial or full.

Partial scholarship includes

- i) Part of the tuition fees
- ii) Basic health insurance
- iii) Monthly allowance for one academic year (8 months only).

Full scholarship includes

- i) Tuition fee
- ii) Basic health insurance
- iii) Monthly allowance for one academic year (8 months only)

- Accommodation, transportation and travel arrangements, to and fro or in Israel, will be borne by the student.

5. The following documents are required to be uploaded at the time of applying online.

- Colour passport size photograph (it must be in .jpg or .jpeg format)
- Signature (it must be in .jpg or .jpeg format)
- Letter of acceptance from supervisor/ Israeli university
- Marks sheets of 10 and 10+2 (self attested)
- University/College Transcript for Bachelor's and Master's degree.

(The size must not exceed 530 kb for each of the document, photograph, and signature)

6. In case there are more number of students than the available nominations, preference would be given to those students who have received letter of acceptance from Israeli institution/university, which ranked higher as per the latest QS ranking of World Universities.

7. The shortlisted candidates would be required to appear for the document verification. The venue, time and date would be intimated to the shortlisted candidates. The following documents are required at the time of document verification:

- i. Dully filled in application form prescribed of the Government of Israel (application form enclosed).
- ii. All original marks sheets and certificate of class 10 and 10+2, transcript and degree in respect of Bachelor's and Master's and all other original degrees and diploma.
- iii. Self-attested copies of all original documents.
- iv. Detailed proposal of the research/specialization, which the applicant intends to study in Israel, specifying the University where the applicant wishes to take admission.
- v. Curriculum Vitae.
- vi. Letter of acceptance from Israeli supervisor/university in respect of the proposed research/specialization.
- vii. At least two (2) letters of recommendation from lecturers/professors who taught the candidates.
- viii. Three (3) photographs
- ix. Certificate of Health.
- x. NOC from the employer. In case of Government Servant, clearance of the Cadre Controlling Authority is mandatory.

NOTES:

- (1) Candidates who do not fulfill the eligibility condition need not apply.
- (2) Equivalent foreign degree will be considered.
- (3) Canvassing in any form will lead to disqualification.
- (4) All announcements will be made available on the website of the Ministry of Human Resource Development www.mhrd.gov.in/scholarships only.



(Ghanshyam)

Under Secretary (Scholarship)

Dt. 08.10.2018

Tel: 011 26172896

ISRAEL GOVERNMENT SCHOLARSHIPS (Academic year: 20__ - 20__)

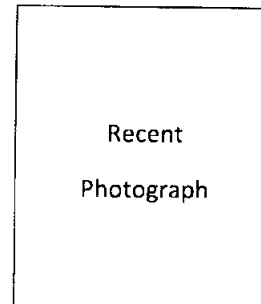
APPLICATION FORM

To be filled in English, in triplicates

Country of origin: _____

Scholarship required:

1. Short term Scholarship: language Summer Course (Ulpan)
2. Long term Scholarship: (one academic year=8 months only):
(please circle your choice): Post Doctorate/Research/Ph.D./ M.A./overseas program



Personal details:

1. Surname: _____
2. First name: _____
3. Place of birth: _____
4. Citizenship: _____ Additional Citizenship: _____
5. Date of birth: _____
6. Gender: **Male / Female**
7. Permanent address: _____

8. Current address: _____

9. Passport no.: _____
10. Telephone: _____ Cellular Phone: _____
11. Fax: _____
12. E-Mail: _____
13. Marital status: _____



14. At which institution do you wish to pursue your studies or undertake research work?

- a. _____
- b. _____
- c. _____

15. Do you have a supervisor already? (for post doctorate and research students only)

NO / YES Name of supervisor: _____
(please enclose any letter you have from your supervisor)

16. Have you been in contact, or have you registered to any university or professor in Israel (Please indicate): _____

17. Have you been accepted by any university or professor in Israel? (Please indicate and enclose a letter of acceptance). _____

18. Current and previous university education:

List in chronological order, starting with your current enrollment, all colleges and universities you have attended.

Name and place of institution	Major	Number of years	Date of graduation	Degree

19. In which language will you conduct your research/studies in Israel? _____

20. Language skills (x=none; xx=poor; xxx=fair; xxxx=good; xxxxx=fluent)

Languages	Reading	Speaking	Writing
Hebrew			
English			
Other:			

21. Type of proof for language skills: _____

22. Present occupation: _____

23. Detailed program for your studies in Israel. (if this space is insufficient, please use a separate sheet and attach it to this form as an appendix).

24. Other details that you consider important for the evaluation of your application.

MEDICAL HEALTH CERIFICATE:

1. Name: _____

2. Place of birth: _____

3. Date of birth: _____

4. Address: _____

5. Person to be notified in case of emergency:

Name: _____

Full address: _____

Telephone No. _____

Cell phone No. _____

Fax No. _____

E-Mail: _____

The following details are to be supplied by a registered medical practitioner:

1. Past medical history: _____

2. Present state of health: _____

3. Results of general examination:

Blood pressure: _____ Weight: _____ Height: _____



4. Is the applicant suffering from:

An infectious disease? _____

A skin disease? _____

A Psychological disorder? _____

Cardiac condition? _____

Any other diseases? _____

5. Remarks: _____

6. Is the applicant in good health and able to physically and mentally engage in intensive studies in a foreign country? _____

Name of examining physician:

Signature of examining physician:

Date of examination: _____

To be signed by the applicant:

I, the undersigned, declare that all of the above information in this application form is complete and accurate to the best of my knowledge. I am aware that giving incorrect answers to any of the above questions may lead to the cancellation of my application.

Date: _____ Signature: _____

