# APPLICATION FORM FOR CESBID PROJECT PROPOSALS

1.  **Name of the Department:**

   _____

2.  **Name of the Faculty:**

   _____

3.  **Name of the Project:**


   _____

4.  **Intended project category of the proposed project:**

   ☐ Training & Development (TD)          ☐ Scholarly Initiatives (SI)

   ☐ Industry-based Consultancies (IC)          ☐ Outreach Activities (OA)

5.  **Proposed duration of the project:**

   **From:** _____     **To:** _____

6.  **Project team:**




7.  **Project Team lead and contact details:**



8.  **Description of the project:**

**9.  Description of the intended stakeholder group:**

**10. Description of the strategic impact of the partnership in creating brand identity:**

**11.  Project outcomes:**

**12. Project milestones and Gantt Chart:**

**13.  Estimated Budget to be enclosed as a separate Annexure.**

**14.  Any other specific remarks:**