**Proposal ID ............................................**

**(for official use only)**

**Research Grant Proposal**

**Form A**

1. **Project title:**

(The title of the project is very significant. It is a descriptive name. The title must be clear, appropriate for the topic and less than 60 characters, including spaces and punctuation. This should be well defined)

1. **Discipline/ Subject Area:**
2. **What will be the end product?**

(Mention here the product that this project aims to develop. If the end product consists of several modules then each module should be mentioned here.)

1. **Specifications of the end product :**

(Criterion for successful completion of the project: If the target specifications are achieved the project will be deemed to be completed successfully). Mechanical / Electonic / theoretical specifications of the end product.

1. **Objective of the project:**

(Mention the aims and scope of the research project)

1. **How the project is useful for the society?**
2. **Motivation for taking up this project**
3. **Industry state of the art and needs**
4. **The new system (proposed in this project)**
5. **Innovative elements of the proposed project**
6. **Methodology: (Project Implementation Details)**

(Describe how the project will be implemented Follow it with a flow diagram or table as below)

1. **Activity Bar Chart (DETAILED WORK PLAN MONTHY)**

**Date of starting:**

**Date of completion:**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **S. No.** | **Activity** | Time in months for 8 months  Stage – I (VII Sem) Stage – II (VIII Sem) | | | | | | | | |
| 1 | 2 | 3 | 4 |  | 1 | 2 | 3 | 4 |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |
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| 9 |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |

Symbols to be used for marking beginning and completion of activities

|  |  |  |  |
| --- | --- | --- | --- |
| ∇ | Scheduled beginning of the activity | ∆ | Scheduled completion of the activity |
|  | Re-scheduled beginning of the activity | □ | Re-scheduled completion of the activity |
| ▼or ■ | Actual beginning of the activity | ▲or ■ | Actual completion of the activity |

1. **References: (Max. 10, atleast 5 references should be of last two year research)**
2. **Team members**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Highest Degree. | Mobile No | .Email | Address |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **Name & Address of the Institute , in whose name, Demand Draft/Bankers Cheque of grant is to be sent (if approved):**
2. **Bank Account No (of point 15).**

Name of the Benificiary:

IBAN / Account Number.

Bank Name:

Swift Code:

IFSC Code:

Bank Address:

1. **Name & Designation of the Supervisor/Guide**

Institutional & Correspondence Address of the Guide with Telephone No.

|  |  |  |
| --- | --- | --- |
| **Institutional Adderss** | **Correspondence Address** | **Mobile No./Email** |
|  |  |  |

1. **Details of facilities to be provided by the Institution**
2. **Budget Estimates (with details)**

**Signature of Guide of the Project Signature of Team Member**

**Send it in scanned format with the signature of** Head of Institution

(Name and Designation **with stamp)**

**C E R T I F I C A T E**

**(On Institute or Unversity Letter Head)**

It is hereby certified that

1. Institution / University takes the full responsibility of compliting the Research Project Within mentioned period.
2. The Institution shall provide the Infrastructural & other facilities required for the complition of the project.
3. The amount sanctioned by IJAERS journal shall be provided to the concerned Student/Guide timely and funds be utilized for the purpose for which it has been sanctioned.

Date:

Place:

Signature of the Head of Institution

Name and Designation **with stamp**

**- -- -- -- - - - - - - - -**

The Bank Details of the Institution/College prescribe are mentioned as below :-

1. Name of the Bank :

1. A/C No. :
2. IFSC Code
3. SWIFT Code:
4. Mobile number of Guide and Team Member

Signature of the Head of Institution

Name and Designation with stamp

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