

**KARNATAKA STATE COUNCIL FOR SCIENCE AND TECHNOLOGY**

*Indian Institute of Science campus, Bengaluru*

Telephone: 080 -23600978, 23341652 || Email: spp@kscst.org.in

Website: www.kscst.iisc.ernet.in/spp.html or www.kscst.org.in/spp.html

**FORMAT FOR STUDENT PROJECT PROPOSAL FOR THE**

**45th SERIES OF STUDENT PROJECT PROGRAMME**

(Handwritten proposals will not be accepted, please fill all the details in this MS word file, insert images / diagrams wherever necessary. Convert to pdf file, get it approved from the project guide / head of the department and principal of your institution. Keep ready the scanned pdf file of 1) Declaration and Endorsement 2) details of processing fees made and fill-up the Google Form. Send the softcopy of the project proposal including the three scanned pages and send the proposal (All information in one pdf file) by email to spp@kscst.org.in

https://forms.gle/9wriMyaKhBaGaWpw7

|  | **Name of the College:** |
| --- | --- |
|  | **Project Title:** |
|  | **Branch:** |
|  | **Theme (as per KSCST poster): (The project proposals shall mandatorily be from one of the broad themes / areas. Visit website www.kscst.org.in/spp.html)** |
|  | **Name(s) of project guide(s):**   1. **Name: Prof. / Dr. / Mr. / Mrs.**   **Email id:**  **Contact No.:**   1. **Name: Prof. / Dr. / Mr. / Mrs.**   **Email id:**  **Contact No.:** |
|  | **Name of Team Members (Strictly not more than four students in a batch):** *(Type names in Capital Letters as provided in your college)* (Please paste the latest passport size photograph adjacent to your respective names)  **Name:  USN No.:**  **Email id:**  **Mobile No:**  **Name:**  **USN No.:**  **Email id:**  **Mobile No.:**  **Name:**  **USN No.:**  **Email id:**  **Mobile No.:**  **Name:**  **USN No.:**  **Email id:**  **Mobile No.:** |
|  | **Team Leader of the Project:**  **Name:**  **USN No.:**  **Email id:**  **Mobile No.:** |
|  | **Processing Fee Details (Through Online Payment only):  (processing fee of Rs. 1000/-)**  **Please furnish the payment made details provided in the last page of this proposal.**  **Note:** (The student team shall furnish the details in the Google Form. It is informed to the students to 1) keep ready the project proposal and 2) make the payment made details for processing fees and 3) Enter the details in the Google Form on the same day of payment made to KSCST by NEFT / UPI payment). |
|  | **Date of commencement of the Project:** |
|  | **Probable date of completion of the project:** |
|  | **Scope / Objectives of the project:** |
|  | **Methodology:**  **Note:** In case of fabrication work in the project, an engineering drawing with dimensions / detailed design should be attached to the proposal. |
|  | **Expected Outcome of the project:** |
|  | **Is the project proposed relevant to the Industry / Society or Institution?**  **Yes / No:**  **If Yes, please provide details of the Industry / institution and contact details:**  (**Note:** Preference will be given to those projects relevant to the industry / institution. Hence be specific in giving detailed information). Is the industry extending support - technology / funds / use the final product, please specify. |
|  | **Can the product or process developed in the project be taken up for filing a Patent?**  **Yes / No:**  **Prior Art search done?**  **Yes/No:**  **Note:** If your answer is “Yes”, you may contact Patent Information Centre of KSCST. For more details, email: pic@kscst.org.in |
|  | **Budget details (break-up details should be given):**  Note: KSCST will provide nominal grant support for carrying out the project by students if selected by the project selection committee.   | **Budget** | **Amount** | | --- | --- | | a) Materials / Consumables (Please specify) | 0.00 | | b) Labor (Describe) | 0.00 | | c) Travel (Describe) | 0.00 | | e) Miscellaneous (Please specify) | 0.00 | | **Total** | 0.00 | |
|  | **Any other technical details (Please specify):** |
|  | **SPP Coordinator (Identified by the college):**  **Note:** To be identified by the principal of the institution. The project proposals must be submitted to KSCST through SPP coordinator designated by the Principal.  **Name: Prof. / Dr. / Mr. / Mrs.**  **Email id:**  **Contact No.:** |

| **Name of the Project Guide:** | **Name of the HOD:** |
| --- | --- |
| **Email id:** | **Email id:** |
| **Contact No.:** | **Contact No.:** |

**DECLARATION**

**(From Project Students)**

(To scan this page and enclose in the project proposal)

We, the project team hereby declare that the details enclosed in the project proposal (Title of the Project: ……………………………………………………….., Branch: ………………………., College: ………………………………………………………..) are true and correct to the best of our knowledge and belief and we undertake to inform KSCST of any changes therein in the project title, students name will be intimated immediately through project guide. In case any of the above information is found to be false or untrue or misleading, we are aware that we may be held liable for it. We hereby authorize sharing of the project information with this project proposal with the Karnataka State Council for Science and Technology, Bangaluru.

We are aware that the project team must exhibit / demonstrate the project in the nodal centre and interact regarding project with the experts and to exhibit the project in the State Level Seminar and Exhibition (if selected). If the student team fails to attend the evaluation in nodal centre or fails to attend the State Level Seminar and Exhibition, the supported project amount will be returned to KSCST.

We also hereby, enclose the endorsement form to KSCST, Bengaluru.

**Name of the students with USN No. Signature with date**

| **(Name & Signature of Project Guide with Seal)** | **(Name & Signature of HOD with Seal)** |
| --- | --- |
| **Email id:** | **Email id:** |
| **Contact No.:** | **Contact No.:** |

**ENDORSEMENT**

**(From College, endorsement to be taken in the institution / Department Letter head)**

(To scan this page and enclose in the project proposal)

This is to certify that 1) Mr. / Ms.……...................., 2) Mr. / Ms. ……………................  
3) Mr. / Ms. …………………............, 4) Mr. / Ms. ……………………................, are bonafide student(s) of Department of ......................................................., in the degree program of our institution. If the project proposal submitted by these students under the 45th series of Student Project Programme is selected by KSCST, we will provide the requisite laboratory / Computer / infrastructure support in our college / Institution. Further we also take necessary steps to see that the project team will exhibit / demonstrate their project in the nodal centre and in the State Level Seminar and Exhibition (if selected). If the student team fails to send the completed project report or fails to attend the evaluation in nodal centre or fails to attend the State Level Seminar and Exhibition, the supported project amount will be returned to KSCST.

| **(Name & Signature of  Project Guide with Seal)** | **(Signature of HOD with Seal)** | **(Signature of the Principal with Seal)** |
| --- | --- | --- |
| **Email id:** | **Email id:** | **Email id:** |
| **Contact No.:** | **Contact No.:** | **Contact No.:** |

**DETAILS OF PROCESSING FEES MADE THROUGH   
NEFT / UPI PAYMENT**

(**Note:** Include this page in the softcopy of the student project proposal. The student team shall furnish the details in the Google Form. It is informed to the students to 1) keep ready the softcopy of the project proposal and other documents and 2) Furnish the payment made details as processing fees and 3) update the details in the Google Form on the same day of payment made to KSCST by NEFT / UPI payment).

| 1. TITLE OF THE PROJECT | : |  |
| --- | --- | --- |
| 1. NAME OF THE TEAM LEADER | : |  |
| 1. EMAIL ID | : |  |
| 1. CONTACT MOBILE NO. | : |  |

**PAYMENT MADE DETAILS**

| 1. BANK REF. NO. / UTR NO. / UPI No. (12 digits) | : |  |
| --- | --- | --- |
| 1. TRANSACTION ID | : |  |
| 1. NAME OF THE SENDER / ACCOUNT HOLDER and CONTACT NUMBER | : |  |
| 1. NAME OF THE BANK | : |  |
| 1. PROCESSING FEES | : | Rs. 1000/- |
| 1. DATE OF PAYMENT MADE | : |  |
| 1. TIME | : |  |
| 1. MODE OF PAYMENT MADE (NEFT / UPI, PLEASE SPECIFY) | : |  |

| (Name & Signature of  the team leader) | (Name & Signature of  Project Guide or HOD with Seal) |
| --- | --- |

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Indian Institute of Science campus, Bengaluru

**45th SERIES OF STUDENT PROJECT PROGRAMME (SPP)**

***(Note: This page is for information about bank details of KSCST to the student team and college / institution and not to include this page in the project proposal softcopy)***

**BANK ACCOUNT DETAILS OF KSCST**

| Name and address of the Institution | Karnataka State Council for Science and Technology, IISc Campus, Bangalore -560012 |
| --- | --- |
| Account holder’s name / Designation | Secretary, Karnataka State Council for Science and Technology |
| Bank Account No. & Name of the bank | Current A/C No. 0683201000024 Canara Bank, IISc Campus Branch, Bangalore-560012 |
| IFSC Code | CNRB0000683 |
| MICR Code | 560015023 |
| Bank Branch Address | Canara Bank, Indian Institute of Science, Bangalore-560012 |

