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| **APPLICATION FORMAT FOR START-UP RESEARCH GRANT** | | |
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| 1. Details of the proposer : | | |
| a. Name: | | |
| b. Designation : | | |
| c. Department | | |
| d. Contact: | Telephones: | Email: |
| e. Date of joining: | | |
| f. Subject: | | |
| 2.Broad subject area of the proposal: | | |
| 3. Specialization: | | |
| 4. Keywords: | | |
| 5. Title of the proposed project: | | |
| 6. Details of the proposed project to be undertaken: | | |
| 7. Origin of proposal: | | |
| 8. Objectives of the proposed project: | | |
| 9. Review of R&D in the proposed area (National & International Status, Importance, Patents etc.): | | |
| 10.Work plan (including detailed methodology and time schedule): | | |
| 11. Future plans: | | |
| 12. Research proposals of the applicant under consideration by external funding agencies (date sent, Funding agency, title): | | |
| 13.Details of financial requirements and phasing (maximum duration – 24 months) | | |
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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Sl. No. | Head of Account | Budget (Rs) | | | |  |  | 1st Year | 2nd Year | Total | | 1 | Consumables |  |  |  | | 2 | Travel and Contingency |  |  |  | | 3 | Equipments (generic name with required accessories) |  |  |  | | TOTAL | |  |  |  | | | |
| 14. Justification of funds requested: | | |
|  | | |
| Signature of the proposer: | |  |
| Name: | |  |
| Date: | |  |
|  | | |
| Forwarded by HoD: | | |
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| Recommendations on the proposal by the Standing Committee (not to be filled by candidate): | | |
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| Member | Member | Dean (R&D) |
|  | | |
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| Approved/ Not Approved | | |
|  | | |
| Director | | |