



# University of Hyderabad

Research & Development Cell

For official use only  
Proposal ID: 00001  
Submission Date: 19-03-2023

## Proposal Transmittal Form

Please submit the final proposal along with the proposal transmittal form, fully signed by all project investigators/co-project investigators, heads and deans to research and development cell at least 5 full working days prior to the submission deadline.

### Project Information

#### Proposal Type

- ☐ Pre-proposal: For preliminary review prior to a formal or new proposal  
☒ New: Original submission of a full proposal

**Project Title :** Changes to properties of FeSO<sub>4</sub>-ZnO ions under swift heavy irradiation, again and again and again and again and again.

**Is the project being submitted on behalf of a center or institute?**

☐ Yes ☒ No

**Is it an institutional project?**

☐ Yes ☒ No

**Is it an inter-institutional project?**

☐ Yes ☒ No

**Principal Investigator :** Tapaj Kumar Das  
**School :** School of Information and Computer Sciences  
**Department :** Department of Computer Application  
**Center :** Not Available  
**Email :** tapaj.das@uohyd.ac.in  
**Contact Number :** +91-8093897687

#### Co-project Investigator(s)

Collaborator Name	Responsibility	MoU Exists	Collaborating Institute
Suprava Jena	Analyst	Yes	Jocata Financial Advisory Pvt. Ltd.

### Funding Information

**Funding Agency/Sponsor Name :** Demo Funding Agency 01

**Does the funding agency/sponsor limits the number of proposal submitted per institution?**

☐ Yes ☒ No

**Funding Agency/Sponsor Deadline :** 1st January 2025

#### Funding Details

Funding Agency/Institute Name	Budget
Demo Funding Agency 01	1000000
UoH Budget	100000
Electronic Arts	100000
	<b>1200000</b>
UoH Overhead	10000

### Approval Information

Does this project require IEC/AEC/IBC approval?

☐ Yes ☒ No

Does this project involve human subjects? (IEC)

☐ Yes ☒ No

Does this project involve animal subjects? (AEC)

☐ Yes ☒ No

Does this project involve radioactive material/radiation?

☐ Yes ☒ No

Does this project involve biohazard or rDNA? (IBC)

☐ Yes ☒ No

## Proposed Activity Information

- ☒ Research and Development
- ☐ Conducting Training Program
- ☐ Conducting Conference/workshop/training program
- ☐ Conducting clinical trial

The information contained on this form and the corresponding proposal is true and complete. I don't expect the University to share in any additional expenses to execute the project. If the project is funded, I will accept the responsibility for the scientific conduct of the project and will administer the project in accordance with the terms and conditions of the grant or contract including the fulfillment of reporting requirements indicated by the funding agency.

\_\_\_\_\_  
Signature of Principal Investigator

\_\_\_\_\_  
Signature of Head of the Academic  
unit of PI

\_\_\_\_\_  
Signature of Dean of the School of  
PI

\_\_\_\_\_  
Signature of Co-PI

\_\_\_\_\_  
Signature of Head of the Academic  
unit of Co-PI

\_\_\_\_\_  
Signature of Dean of the School of  
Co-PI

The proposal appears to be complete and accurate representation of the project. The budget confirms to University policies. I recommend/approve the submission of this proposal to the designated funding agency.

Director  
RDC

I recommend/approve the submission of this proposal to the designated funding agency.

Registrar

I recommend/approve the submission of this proposal to the designated funding agency.

