FORM -A

A Application for research grant should be in this format to be submitted in triplicate. All Columns are to be duly filled in Separate sheets may be attached wherever necessary.

1.A.(a) Name of the Principal Investigator	
(b) Designation	
(c) Present Address	
(d) Permanent Address	
(e) Date of birth	
(f) Head of Institution/Department to whom the applicant is attached/working :	
(g) Publications (on subject of relevance to the project).	
B. (a) Name of the Co-investigators :	
(b) Designation	
(c) Present Address	
(d) Permanent Address	
(e) Date of birth : (f) Head of the Institution/Department to whom attached	
(g) Publications (on subject of relevance to the project : II	
(a) Title of the Scheme	
(b) Department/Institution whereresearch will be carried out: ContdP/5 -: 5 :-	
(c) Facilities available	
(d) Completion time in months (should normally be less than 24 months)	
(e) Project summary (within 200 words)	
(f) A brief history of development in the field of research	
(g) The Institutes in India at present engaged in this field of research	
(h) The specific application value of the work	
(i) The Institution/Organisations which will be interested in this research:	
(j) Research methodology	
III. (a) Name & Designation of Research Guide	
(b) Bio-data of the guide	

V. Costs : Item 1st Year 2nd Year	
(a) Non-recurring items .	
(b) Recurring items	
1) Salaries of Staff etc	
2) Contingencies	
(c) Others	

I undertake to comply with all the rules and instructions contained in the booklet on Guidelines for award of Grants for Research projects on Science and Technology and such other instructions received from the Council from :

Signature of the applicant

Countersigned Head of Institution/ Department.

V.Recommendation of the head of Institution/Department regarding ;

a) Capacity of the applicant to undertake the research as per programme.

b) availability of research facilities of the institution to the applicant.

c) need to purchase equipment beyond that available at the institute for the work. Certified that the equipment and other basis facilities mentioned in the application and such other administrative facilities as per terms and conditions of this grant is to be extended to the investigator(s) during the course of investigation

Signature of the Head of the Department /Institution

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Registration Amount No	- Amount Approved	
	Amount Approved.	
Date:		
Memo No	:	
Date	:	
Amount Sanctioned	:	
Remarks	:	