**SGT UNIVERSITY**

**Performa for Intramural Research Grant (Seed Money)**

* 1. **Title of the Research Proposal:**
	2. **Subject area:**
	3. **Name & Designation of Principle Investigator:**

 *(Phone No. and e-mail are mandatory)*

* 1. **Name & Designation of Co-Principle Investigator:**

 *(Phone No. and e-mail are mandatory)*

* 1. **Faculty/Department:**
	2. **Project Type (Please mark):**

 Applied Research [ ]  Proof of concept [ ]  Conceptual framework of the model [ ]

* 1. **Project duration** (please mark): 6 month [ ]  1 year [ ]  1½ year [ ]  2 years [ ]
	2. **Aim/Objective of the project:**
	3. **Abstract of the project:**
	4. **Introduction to the proposed problem:**
	5. **Details of literature review:**
	6. **The expected outcome of the project**
	7. **Proposed work plan (Methodology):**
	8. **Budget estimate along with justification for the proposed project:**

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Items** | **Amount (Rs)** | **Justification** |
| 1. | Consumables  |  |  |
| 2. | Others (specify) |  |  |
| 3. | Equipment (Non-Recurring) |  |  |
|  | **Total** |  |  |

* 1. **Details of other required faculties (if any):**

**Declaration**

Certified that the details furnished above are correct to the best of my knowledge and belief and that the amount of financial assistance, if granted, will be utilized for the purpose for which it is granted within the time prescribed by SGT University. I also undertake to abide by the rules and other conditions prescribed by the grantee.

**Name and Signature of the Investigator Name and Signature of the Co-Investigator**

**Signature of the Dean**

**Place: Date:**