

APPLICATION FOR SANCTION OF PROJECTS GRANT

Personal Details

PRINCIPAL INVESTIGATOR

Name	
Designation	
Faculty	
Department	
Employee ID	
Official email ID	
Personal email ID	
Mobile no.	
WhatsApp No.	

CO-INVESTIGATOR (if any)

Name	
Designation	
Faculty	
Department	
Employee ID	
Official email ID	
Personal email ID	
Mobile no.	
WhatsApp No.	

Research Experience of PI

Previous Grants (Amount)	Project Title	Year	Sponsor



Current Application Details

		Expected
	Total	Duration
Project Title	Amount	for
		Completion

Brief Budget Breakup

Head	Amount	Justification
Equipments		
Apparatus		
Chemicals		
Field Visits		
Printing etc		
Others		
TOTAL		

Declaration by the Applicant:

I solemnly pledge that I shall abide the by rules and regulations of research grants scheme and maintain a proper account of the expenditure. I will adhere to the timeline.

Date:

Signature of Applicant

Remarks of the Dean Faculty

I recommend that the application of Dr._____

for sanction of projects grant from the R&D Cell of the Rama University, Kanpur, may be accepted.

Date:

Signature & seal of the Dean Faculty



Recognition by the University					
Application of Dr	for sanction				
of projects grant from the R&D Cell of Rama Un	iversity, Kanpur was submitted to the				
Reviewers' Committee constituted to review	such applications. The Committee				
considered the application in its meeting dated A copy of the Minutes of					
Meeting is held with the Office of R&D. On The	ne Committee recommended that the				
application is:					
22 Approved					
☑ ☑ Not approved					
Date:					
	Name & Signature of Reviewer-1				
Date:	Name & Signature of Reviewer-1				
Date:	Signature of Asst. Director R&D				
Date: Sig	gnature of Vice Chancellor/ Director				
FOR OFFICIAL US	E ONLY				
Project Reference No					
Application No					
Account Ledger					
Date:	Office Asst R&D				

The Office of R&D \mid 3