MINOR RESEARCH PROJECT

PART- A

- 1. Broad Subject
- 2. Area of Specialization
- 3. Departments Involved
- 4. (A) Principal Investigator
 - i. Name:
 - ii. Sex: M/F
 - iii. Date of Birth:
 - iv. Category: (GEN/SC/ST/OBC)
 - v. Qualification:
 - vi. Designation:
 - vii. Address: Office:
 - viii. Address: Residence:
 - ix. Email/ Phone:
- 5. (B) CO- Principal Investigator 1
 - i. Name:
 - ii. Sex: M/F
 - iii. Date of Birth:
 - iv. Category: (GEN/SC/ST/OBC)
 - v. Qualification:
 - vi. Designation:
 - vii. Address: Office:
 - viii. Address: Residence:
 - ix. Email/ Phone:
- 6. (B) CO- Principal Investigator 2
 - i. Name:
 - ii. Sex: M/F
 - iii. Date of Birth:
 - iv. Category: (GEN/SC/ST/OBC)
 - v. Qualification:
 - vi. Designation:
 - vii. Address: Office:
 - viii. Address: Residence:
 - ix. Email/ Phone:
- 7. Teaching and Research Experience of Principal Investigator:
- a) Teaching experience:
- UG Years
- PG Years
- b) Research experience:
- c) Publication:

Papers Published: Accepted: Communicated:
Books Published: Accepted: Communicated:

(Please enclose the list of papers and books published and/ or accepted during last year's)

PART-B

6. Proposed Research Work

- (i) Project title
- (ii) Summary of the Project
- (iii) Introduction
- (iv) Aim and Objectives
- (v) Critical Literature Review
- (vi) International Scenario
- (vii) National Scenario
- (viii) Justification of Interdisciplinary nature of the Project
- (ix) Methodology
- (x) Year- wise Plan of work and targets to be achieved.
- (xi) Feasibility Study of the work planned
- (xii) Expected outcome of the Project
- (xiii) Possibilities of Patent/ Copyright/Publications etc.

7. Financial Assistance required

Item		Estimated Expenditure
Recu	ırring	
i)	Field Work and Travel	
ii)	Chemicals and glassware	
iii)	Hiring Service	
Non-	-Recurring	
i)	Books and Journals	
ii)	Equipment, if needed	
iii)	Contingency (including special	
	needs)	
	Total:	

Acceptance and Declaration by the Investigator

To,				
	Convener, arch Culture Promotion	n Committee (RCPC),		
Shri S Amra	Shivaji Science Colleg vati.	e,		
Respe	ected Madam / Sir,			
Su	bject: Acceptance and	declaration for minor rese College, Amr		ed by Shri Shivaji Science
1.	ndersigned, PI Co – PI			
	. Co - PI . Co - PI			
		o accept the research gran ant Scheme, Shri Shivaji Sc		er Dr. Panjabrao Deshmukh
	nderstand that, the Re			oned to conduct research on
As pe will c	comply the Project will		port (FTR) at the	scheme designed by RCP, I end of the project.
Signa	ature of PI with date	Signature of Co-F	I with date	Signature of Co-PI with date
Namo	e:	Name:	1	Name:
Forw	arded through Head:			
Decla Date:	aration is accepted: :	Head Department of	Shri S	Principal Shivaji Science College, Amravati
For o	office Purpose:			
1. 2.	Date of declaration: Cheque details:	Amount: Rs.	Cheque No.	: Date:
	1		239.50 110.	_ ~~

2.

Shri Shivaji Science College, Amravati Dr. Panjabrao Deshmukh Minor Research Project Grant Scheme STATEMENT OF EXPENDITURE IN RESPECT OF MINOR RESEARCH PROJECT

1. Name of Prince	cipal Investigator		
2. Dept. of PI			
3. Title of the Re	esearch Project		
4. Effective date	of starting the project		
5. a. Period of Ex	xpenditure: From	to	
	Expenditure		
Sr. No	Item	Amount Approved (Rs.)	d Expenditure Incurred (Rs.)
i	Books & Journals		
ii	Equipment		
iii	Contingency including special needs		
iv	Field Work/ Travel (Give details in the proforma).		
v .	Hiring Services		
vi	Chemicals & Glassware		
received from the entitled Dated	<u>.</u>	cheme of support for the part of the part	letter ref. no.
ignature of PI w	ith date Signature o	of Co-PI with date	Signature of Co-PI with date
Name:	Name:		Name:
orwarded througl	h Head:		
Pate:		Shi	Principal ri Shivaji Science College,

Amravati

STATEMENT OF EXPENDITURE INCURRED ON FIELD WORK

Name of the Principal Investigator:

Name of the Place visited	Duration	of the Visit	Mode of Journey	Expenditure Incurred (Rs.)
	From	То		
Certified that the ab Research Projects.	oove expendit	ure is in accor	dance with the Instit	tution norms for Minor
Signature of PI with Name:	date	Signature of Name:	Co-PI with date	Signature of Co-PI with date Name:
Forwarded through H	lead:			
Date:			Sh	Principal ari Shivaji Science College,

Amravati

Utilization certificate

Certified	that the	grant	of R	S						
(Rupees										
	• ,	received Project	from the entitled	College und	ler i	the	scheme	of	support	for
1 6.11				number						_has
termsand co				which it was	s sancti	oned	and in a	iccor	iance with	i the
Signature of	PI with da	te	Signatu	ıre of Co-Pl	with d	ate	Signa	iture	of Co-PI	with date
Name:			Name:				Namo	e:		
Forwarded th	rough Head	l:								
Date:						Sh		-	ence Coll	ege,

Annual Report of the work done on the Minor Research Project (Report to be submitted after completion of one year)

Date:	Sh	Principal ri Shivaji Science College,
Forwarded through Head:		
Signature of PI with date Name:	Signature of Co-PI with date Name:	Signature of Co-PI with date Name:
ofwork done may also be sent v. Any other information	to the concerned Regional Office of	the University.
objective. If not, state reasons.	ording to original plan of work and to of the findings of the study. One bou	_
(Give details of the papers and for publication_	sults achieved and publications, if a lames of the journals in which it has	as been published or accepted
i. Brief objective of the project	t	
b. Total expenditure Rs		
a. Total amount approved R		
_	iture incurred during the period of th	
	the project	
	vestigator	
	to	
		_
1. Project report No. 1 st		

Åmravati

PROFORMA FOR INFORMATION REQUIRED WITH FINAL TECHNICAL REPORT

1 TITLE OF THE PROJECT_		
	L INVESTIGATOR	
3. APPROVAL LETTER NO. A	AND DATE	
4. DATE OF IMPLEMENTATI	ON	
5. TENTURE OF THE PROJEC	CT	
6. TOTAL GRANT ALLOCAT	ED	
7. TOTAL GRANT RECEIVE)	
8. FINAL EXPENDITURE		
9. OBJECTIVES OF THE PRO	OJECT	
10. WHETHER OBJECTIVES	WERE ACHIEVED	
(GIVE DETAILS)		
11. ACHIEVEMENTS FROM	ΓΗΕ POROJECT	
12. SUMMARY OF THE FIND	DINGS	
(IN 500 WORDS)		
13. CONTRIBUTION TO THE	SOCIETY	<u> </u>
(GIVE DETAILS)		
14. NO. OF PUBLICATIONS (OUT OF THE PROJECT	
(PLEASE ATTACH)		
Signature of PI with date Name:	Signature of Co-PI with date Name:	Signature of Co-PI with date Name:
Forwarded through Head:		

Date:

Principal Shri Shivaji Science College, Amravati

ASSESSMENT CERTIFICATE

(to be submitted with the proposal)

It is certified that the proposal entitled –		
by (Dr./Prof./Mr /Mrs.)		
Deptt. of		
has been assessed by the committee.		
The Remarks and the recommendations of	the committee:	
		-
Member	Position	Signature
Member Principal	Position Chairman	Signature
Principal		Signature
	Chairman	Signature
Principal Convener, Research Culture Promotion Committee	Chairman	Signature
Principal Convener, Research Culture Promotion Committee	Chairman Secretary	Signature
Principal Convener, Research Culture Promotion Committee IQAC Coordinator	Chairman Secretary Member	Signature

Recommendations of the committee has been recorded on date _____:

Convener

Research Culture Promotion Committee Shri Shivaji Science College, Amravati **Principal**Shri Shivaji Science College,
Amravati