



No. VSSUT/ / /20

Date.

SUBMISSION OF SPONSORED RESEARCH PROJECT PROPOSAL

1. Name of Funding Agency:
2. Scheme of Project Grant:
3. Project Title:
4. Advt. no (if any) and Date:
5. Name of Principal Investigator:
6. Department:
7. Name of Co- Investigator:
8. Department:
9. Budget for Non-recurring Expenses: ₹
10. Budget for Recurring Expenses: ₹
11. Total Budget of the Project (X): ₹
12. Overhead Charges of the University, ($Y = \frac{1}{4}X$): ₹
if any as per the provision of the funding agency
13. Total Budget of the Project ($Z = X + Y$): ₹
14. Is there any Collaboration with other organization: YES/NO (If YES then fill up the page-3 of this form also)

This is certified that the PI as mentioned above shall be responsible for completion of the project as per the guidelines of the University (SRIC: Standard Operating Manual-2019) and the funding agency. Recommended and Submitted for issue of endorsement certificate and forwarding the project proposal to the funding agency as mentioned above.

Principal Investigator

Co-Investigator

Head of the Department

(NB: Please enclose the advertisement copy and the project guidelines)

FOR SRIC OFFICE USE ONLY

Forwarded to the funding agency vide SRIC office letter no. VSSUT/SRIC/ / dated:

Dealing Assistant

Associate to Dean (SRIC)



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DETAIL BREAKUP OF BUDGET

1. Name of Funding Agency:
2. Scheme of Project Grant:
3. Project Title:
4. Detail Budget Breakup

Non-Recurring		Recurring	
Items (Mention Sub-Heads)	Amount (₹)	Items (Mention Sub-Heads)	Amount (₹)
Total Non-Recurring		Total Recurring	

5. Total Budget-(X) (Non-Recurring + Recurring): ₹
6. Overhead Charges of the University, $(Y = \frac{1}{4}X)$: ₹
if any as per the provision of the funding agency
7. Total Budget of the Project $(Z = X + Y)$: ₹

Principal Investigator

Co-Investigator

Head of the Department



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DETAILS OF COLLABORATING UNIVERSITY, INSTITUTION OR ORGANIZATION

1. Name of Funding Agency:
2. Scheme of Project Grant:
3. Project Title:
4. Advt. no (if any) and Date:
5. Details of Investigator from Collaborating Organization (Add Sheets if required):

Name of Investigator:

Department:

Collaborating University/Institution/Organization:

Detail address:

e-mail and phone number:

6. Total Budget of the Project (Z): ₹

7. Distribution of Grant between VSSUT and the Collaborating Organization

VSSUT Share

Non-Recurring		Recurring	
Items (Mention Sub-Heads)	Amount (₹)	Items (Mention Sub-Heads)	Amount (₹)
Total Non-Recurring		Total Recurring	
Total Budget-(X) (Non-Recurring + Recurring): ₹			
Overhead Charges of the University (Y): ₹			
Total Budget of the Project (Z = X + Y): ₹			

Other Organization Share

Non-Recurring		Recurring	
Items (Mention Sub-Heads)	Amount (₹)	Items (Mention Sub-Heads)	Amount (₹)
Total Non-Recurring		Total Recurring	
Total Budget-(X) (Non-Recurring + Recurring): ₹			
Overhead Charges of the University (Y): ₹			
Total Budget of the Project (Z = X + Y): ₹			

Principal Investigator

Co-Investigator

Head of the Department