

# **FACULTY PROJECT**

## **COMPARATIVE STUDIES OF THE POTENTIAL OF SOME EDIBLE MUSHROOMS AS SOURCE OF BIOACTIVE COMPOUNDS AND NUTRACEUTICAL AGENTS**

### **Project Plan**

Submitted by  
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Assistant Professor  
Department of Home Science

Submitted to



**THE IIS UNIVERSITY, JAIPUR  
(2012-2013)**



**THE IIS UNIVERSITY, JAIPUR**  
**FORMAT FOR SUBMISSION OF PROPOSAL FOR**  
**MINOR RESEARCH PROJECT**

**PART -A**

1. Broad Subject
2. Area of Specialization
3. Duration
4. Principal Investigator
  - i. Name:
  - ii. Sex:M/F
  - iii. Date of Birth:
  - iv. Qualification:
  - v. Designation:
  - vi. Residential Address

Telephone No. (O) \_\_\_\_\_

(R) \_\_\_\_\_

(M) \_\_\_\_\_

5. Co- Investigator(s):
  - (i) Name:
  - (ii) Sex: M/F
  - (iii) Date of Birth:
  - (iv) Qualification:
  - (v) Designation:
  - (vi) Residential Address

Telephone No. (O) \_\_\_\_\_

(R) \_\_\_\_\_

(M) \_\_\_\_\_

6. Name of the Department where the project will be undertaken

7. Teaching and Research Experience of Principal Investigator:

(a) Teaching experience : UG \_\_\_\_\_years

PG \_\_\_\_\_Years

M.Phil. \_\_\_\_\_Years

(b) Research experience:

(c) Whether the project has been approved for the doctoral degree ? If so, please indicate :

i. Date of Registration :

ii. Name and designation of the supervisor approved by the University:

iii. Name of the University Institute where registered :

(d) In case the teacher holds a doctoral degree :

i. Title of the thesis :

ii Year of the award of degree:

iii. Name of the University :

(e) Publication:

Papers Published  
:\_\_\_\_\_

Accepted : \_\_\_\_\_ Communicated  
:\_\_\_\_\_

Books Published  
:\_\_\_\_\_

Accepted : \_\_\_\_\_ Communicated  
:\_\_\_\_\_

Please enclose the list of papers and books published and/or accepted during last five years

**PART -B**  
**Proposed Research Work**

8. (i) Project Title :

ii. Introduction

- Origin of the research problem

Interdisciplinary relevance

- Review of Research and Development in the Subject:

- International status

- National Status

- Significance of the study

(iii) Objectives

(iv) Methodology

(v) Year-wise Plan of work and targets to be achieve,

(vi) Details of collaboration, if any intended

9. Financial Assistance required

	<b>Item</b>	<b>Estimated Expenditure</b>
1.	Books & Journals	
2.	Equipment, if needed	
3.	Field Work and Travel (Please specify name & approx. cost)	
4.	Chemicals and Glassware	
5.	Contingency (including special needs)	
	Total :	

10. Whether the teacher has received support for the research project from any funding agency Major, Minor or any other scheme of support for research? If so, please indicate:

- (i) Name of the agency from which the assistance was approved
- ii. Sanction letter No. and date under which the assistance was approved
- iii. Amount approved and utilized
- iv. Title of the project for which assistance was approved
- v. In case the project was completed, whether the work on the project has been published
- vi. If the candidate was working for the doctoral degree, whether the thesis was submitted and accepted by the University for the award of degree.

(A summary of the report/thesis in about 1,000 words may please be attached with the application)

vii. If the project has not been completed, please state the reasons

11. (a) Details of the project/scheme completed or ongoing with the P.I

Name of the agency	Year		Total	Equipment/Infrastructural facilities obtained
	Started	Completed		

(b) Institutional and Departmental facilities available for the proposed work:  
Equipment:

Other Infrastructural facilities :

9. Any other information which the investigator may like to give in support of this proposal which may be helpful in evaluating.

To certify that:

- a. General physical facilities, such as furniture/space etc., are available in the Department/University.
- b. I/we shall abide by the rules governing the scheme in case assistance is provided to me/us from the University for the above project.
- d. I/we shall complete the project within the stipulated period. If I/We fail to do so and if the University is not satisfied with the progress of the research project, it may be terminated and immediately ask for the refund of the amount received by me/us.
- e. The above research Project is not funded by any other agency.

**Name &  
Signature**

**(a) Principal  
Investigator**

(b) Co- Investigator

**Recommended / Not Recommended  
Research Committee  
(with comments)**

**Rector & Registrar**

**Vice-Chancellor**