

**PERFORMA FOR SUBMISSION OF PROJECT PROPOSALS  
UNDER SCIENCE AND SOCIETY PROGRAMME OF DST  
(TO BE FILLED BY APPLICANT)**

**A. EXECUTIVE SUMMARY (to be given on separate page)**

Ref. No.

(to be filled by DST)

1. Project Title:
2. Objectives:
3. Work Plan (highlighting science and technology inputs in 250 words):
4. Project Duration:
5. Project Area (Block and villages to be covered):
6. Budget Summary:
  - i. Total Recurring Cost;
  - ii. Total Non-Recurring Cost:
7. Name of PI, Co-PI and Organization

**B. INTRODUCTION**

1. Project title : \_\_\_\_\_  
\_\_\_\_\_

2. Programme applied for :

STARD	S&T for Women	STAWS
SYSP	SCP	TSP

3. Details regarding :

- (a) Profile of Project area
- (b) Target Population (SC, ST, Women)

(In case of SC/ST, please specify sub-caste)

(c) Direct Beneficiaries.

(d) Date of registration of the organization, place and details of the Act.

4. Duration                      Number of months

5. Total Cost:

6.1 Name of Principal Investigator:

6.2. Designation:

6.3. Department:

6.4. Sex (M/F)

6.5. Date of Birth

6.6 Organisation/Inst. Name:

6.7. Address :

Telephone \_\_\_\_\_, Fax \_\_\_\_\_, Email \_\_\_\_\_

6.8 Name of Co-Investigator :

6.9 Designation :

6.10 Department :

6.11 Sex (M/F)

6.12 Organization/Inst. Name:

7. Address: \_\_\_\_\_  
\_\_\_\_\_ Pin \_\_\_\_\_

Telephone .....Fax.....Email.....

8. Capability of the Organisation

- (a) Expertise available with the group
- (b) Facilities/Assets/Equipments available:
- (c) List of on-going and completed projects by the group giving the following details

<b>Title of the project</b>	<b>Year of start and completion</b>	<b>Project cost</b>	<b>Name of sponsoring Organization</b>
-----------------------------	-------------------------------------	---------------------	--

### **C. TECHNICAL DETAILS**

1. Description of the problem and its priority as perceived by the people including socio-economic status of the area (300 words)
2. Suggested solution(s) and alternatives with anticipated physical and financial benefits. Please also state solutions attempted by your institution and others to solve the problem(s) (200 words)
3. Objectives of the project (**Clearly state how and when objectives will be achieved**)
4. Report of preliminary investigation conducted should include the details: Problem identification, need assessment, technology gaps, present status & need for intervention (with map or GIS data) (300 words)
5. Summary of earlier efforts made to address the problem along with pertinent report of literature survey.
5. Implementation strategy covering aspects such as:
  - (a) Information about local economy, relevant local skills, market availability and link up, etc.
  - (b) S&T component of the project
  - (c) Linkages with S&T institutions/resource persons/R&D agencies for technical back up in implementation of the project, if approved. (Please enclose the supporting documents).
6. Work Plan :
  - (a) Phase-wise plan of action including consultation with the target group, resource person's etc. including post project activities.
  - (b) Time schedule of activities giving milestones.
7. Indicative techno-economic viability/cost benefits analysis
8. Comment on the likely impact on adjoining areas/society.

9. Comment on the possibilities of the activity becoming self-sustainable.
10. Suggested parameters (5-6) for monitoring effectiveness of intervention during and after the completion of the project (Should be qualitative & quantitative and specific to project work).

## **E. BUDGET**

### **BUDGET ESTIMATES: SUMMARY**

(In Rupees)

Item	Budget			
	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	Total
A. Recurring				
1. Manpower				
2. Consumables				
3. Travel				
4. Contingencies/Other cost				
5. Institutional Overheads				
B. Non-Recurring				
Permanent equipment				
<b>Grand Total (A+B)</b>				

**\*Please indicate authorized office bearer of the organization with detailed mailing address under whose name sanction is to be issued, if approved.**

- Financial Year : April to March
- Count six months from submission of the proposal to arrive at expected time point for commencement of the project.
- **It is essential to provide adequate justification for each item of expenditure (about 100 words for each)**

### **BUDGET FOR MANPOWER**

Designation (Number of persons)	Monthly Emoluments	BUDGET			
		1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	Total

Total

(Only NET qualified candidates will be considered as JRF/SRF in a project)

**BUDGET FOR CONSUMABLES (Chemicals, supplies & machinery etc.)**

Description	Budget			
	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	Total
Items				
Total				

**BUDGET FOR TRAVEL**

Item	Budget			
	1 <sup>st</sup> Year	2 <sup>nd</sup> Year	3 <sup>rd</sup> Year	Total
Travel 1. Local				
2. Out Station				
Total				
(International travel is not permitted)				

**BUDGET FOR PERMANENT EQUIPMENT**

Sl. NO.	Name of Equipment Model	Estimated Cost*
1.		
2.		
Total		

\* Include installation charges, inland transport, etc.

Budgetary quotations will be required in support of estimates, if project is approved for financial support.

**ENDORSEMENT FROM THE HEAD OF INSTITUTION**  
**(TO BE GIVEN ON LETTER HEAD)**

PROJECT TITLE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Certified that the Institute welcomes participation of Dr./Shri/Smt./Km. \_\_\_\_\_ as the Principal Investigator and Dr./Shri/Smt./Km. \_\_\_\_\_ as the Co-Investigator for the project and that in the unforeseen event of discontinuance by the Principal Investigator, the Co-Investigator will assume the responsibility for the fruitful completion of the project (after obtaining consent in advance from DST).
2. Certified that the equipment, other basic facilities and such other administrative facilities as per terms and conditions of the grant, will be extended to investigator (s) throughout the duration of the project.
3. Institute assures financial and other managerial responsibilities of the project.
4. Certified that the organisation has never been blacklisted by any department of the State Government or Central Government.
5. The organisation has the following ongoing projects from DST

Name and Signature of Head of Institution

Date: .....

Place:.....

**REMARKS**

In regard to research proposals emanating from scientific institutions/laboratories under various scientific departments the Head of the institution is required to provide a justification indicating clearly whether the research proposals falls in line with the normal research activities of the institution or not and if not, the scientific reasons which merit its consideration by DST.

## CERTIFICATE FROM THE INVESTIGATOR

PROJECT TITLE: \_\_\_\_\_

1. We agree to abide by the terms and conditions of the DST grant.
2. We did not submit this or a similar project proposal elsewhere for financial support.
3. We have explored and ensured that equipment and basic facilities will actually be available as and when required for the purpose of the project. We shall not request financial support under this project, for procurement of these items.
4. We undertake that spare time on permanent equipment will be made available to other users.
5. We have enclosed the following materials:

ITEMS	NUMBER OF COPIES
(a) Endorsement from the Head of the Institution (on letter head)	One
(b) Copies of the proposals	15
(c) Registration certificate, Memorandum of association, rules and regulations of the institution, Audited Balance Sheet and annual report of previous three years.	One

Date : .....

Name & Signature of  
Principal Investigator

Name & Signature  
of Co-Investigator

Place:.....

## PROFORMA FOR BIODATA OF INVESTIGATORS (P.I. & CO-P.I.)

- A. Name
- B. Date of Birth
- C. Institution
- D. Whether belongs to SC/ST
- E. Academic and professional career:
- Academic career:
- Professional career:
- F. Award/Prize/Certificate etc. won by the investigator:
- G. Publication (Numbers only)
- Books                      Research Papers, reports                      General articles
- Patents                      Others (please specify)
- H. (1) List of completed and on going projects

---

Sl. No.	Title of Project	Duration From to	Total Cost	Funding Agency
---------	------------------	---------------------	------------	----------------

---

(2) List of projects submitted

---

Sl. No.	Title of the project	Name of Organization	Status
---------	----------------------	----------------------	--------

---