UNIVERSITY OF JAMMU RESEARCH FUND (UoJRF)

FORM-I

1. Name of the Principal Investigator:

PROJECT SUBMISSION FORM (Submit 'n' Triplicate)

2. Designation:
3. Date of Birth:
4. Department/Centre/Campus:
5. Name of the Co-Principal Investigator/s:
6. Designation:
7. Date of Birth:
8. Department/Centre/Campus:
9. Title of the project (in bold):
10. Duration of the project (24 months) From to
11. Category under which applied 1.1/1.2/1.3 (strike off whichever is not applicable)
12. Whether plagiarism has been checked. Yes/No(If yes, attach plagiarism report)
13. Details of funding requested
a. Consumables:
Justification:
b. Equipment:
Justification:
c. Travel (domestic and field):
Justification:

u. Commigency.	d.	Contingency:
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Justification:

- e. Total funds requested:
- 14. Requirement of any additional space from the Department/ Centre/ Campus-Yes/No

(If yes, give Justification)

15. a) Total no. of ongoing projects with the PI-

Give details of on-going projects such as title, funding agency, total grant sanctioned date of initiation of the project and quantum of work (in terms of percentage) completed till date:

b) Total No. of projects completed by the PI

Give details of completed projects such as title, funding agency, total grant sanctioned, date of initiation, closure of the project and brief summary of completed projects:

- 16. Project proposal (attach document)
 - Title (in bold)
 - Summary (Min. 2500 words)
 - Objectives (not more than three)
 - Methodology (in bullets)
 - Expected output and outcome of the project
 - Schedule of work for 24 months (0-6 months, 7-12 months, 13-18 months and 19-24 months)

17. I/We certify that no civil/electrical modifications shall be carried out without the express permission of the University Engineering Department and the Registrar. We will follow the norms for the operation of the projects framed, from time to time, by the University.			
Name & Signature of the Principal Investigator	Date		
Name & Signature of the Co-Principal Investigator/s	Date		
Recommendations of the HoD			
I certify that the concerned Department/Centre/Campus would provide the basic minimum infrastructure facilities (space, water, electricity, laboratory, library facility, etc) to the PI.			
Head of the department/Director of Center/Campus			
Recommendations of the Dean, Faculty Concerned			
	Dean, Faculty Concerned		

For Office Use Only

Project file Reference No. UojRF/year/deptt./centre/campus/number (three digit)			
Received on	<u> </u>		
	Dealing Clerk	S.O.	
Meeting held on			
	Dealing Clerk	S.O.	
Approved / Not Approved (strike off whichever is not applicable)			
Total Grant sanctioned (both in figures and words), If approved			

Assistant/Deputy Registrar

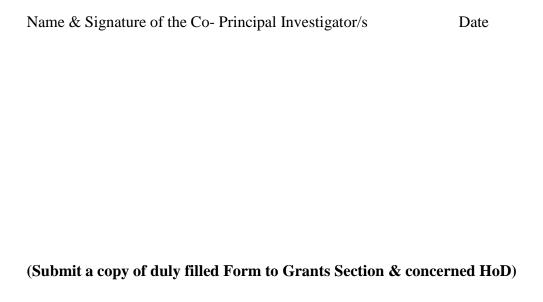
UNIVERSITY OF JAMMU RESEARCH FUND (UoJRF)

FORM-II

PROJECT INITIATION FORM

(Submit in duplicate)

1.	Name of the Principal Investigator with d	lesignation:	
2.	Department/Centre/Campus:		
3.	Name of the Co- Principal Investigator/s	with designation:	
4.	Department/Centre/Campus:		
5.	Title of the Project (as approved in sancti	on letter):	
6.	Tentative Duration of the Project:	From:	To:
7.	Details of grant sanctioned:		
a)	Consumables-		
b)	Equipment-		
c)	Travel (domestic & field)-		
d)	Contingency-		
8.	Date of Initiation of current Project:		
I/We ce	ertify that no civil/electrical modifications	shall be carried out with	hout the express permission of
the Uni	versity Engineering Department and the I	Registrar. We will follo	w the norms for the operation
of the p	rojects framed, from time to time, by the U	University.	
Na	ame & Signature of the Principal Investiga	ator	Date



UNIVERSITY OF JAMMU RESEARCH FUND (UoJRF)

FORM-III

SIX MONTHLY PROGRES REPORT

(submit in duplicate)

1.	Title of the project:
2.	Name & Designation of Principal Investigator:
3.	Name & Designation of Co- Principal Investigator/s:
4.	Duration of the project:
5.	Sanctioned grant:
6.	Date of initiation of the project:
7.	Approved objectives of the project:
8.	Objectives achieved:
9.	Report on research work completed in the current project (Min. 1000 words):
10.	Research work to be completed, in next six month schedule, in the current
	project (Min.1000 words):
11.	Deliverables, if any

Comments of the concerned DRPMC

UNIVERSITY OF JAMMU RESEARCH FUND (UoJRF)

Form-IV

Partial Funding to Attend/ Participate in National/International Conference/ Seminar/ Workshop/ Brain Storming Session Etc.

1.	Name:
2.	Designation:
3.	Department/Campus/Centre/Campus:
4.	Title of the Conference/Workshop/Seminar/Colloquium/Brain Storming Session:
5.	Name of University/ Campus/Organization holding theConference/Workshop/ Seminar
	/Colloquium/Brain Storming Session:
6.	Presenting key note address/Primary session address/Inaugural session address/research paper
	(strike off whichever is not applicable) and attach documentary proof to this effect.
7.	Invited to chair the technical session/chair the inaugural or valedictory session (strike off

whichever is not applicable) and attach documentary proof to this effect.

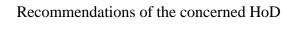
8. Are organizers meeting part of the expenditure? Yes/No

(If yes, give details with documentary proof to this effect)

9.	Has funding from "Social Infrastructure Fund" and/or any other University Centralized Fund of
	University of Jammu been applied/availed? Yes/No
	(If yes, give details with documentary proof to this effect)
10	D. Request for partial fund
	• Travel :
	• Registration fee :
	• DA :
	• Total :
11	Has application for Duty Leave been submitted? Yes /No
12	2. Has Duty Leave been sanctioned? Yes / No
	(If yes, attach copy of the sanction letter)
Si	gnature Date
In case a	pplicant is a bonafide Research Scholar, the following is mandotary:

Recommendation of concerned Research Supervisor

Name & Signature of Concerned Research Supervisor



Seal and Signature of concerned HoD

UNIVERSITY OF JAMMU RESEARCH FUND (UoJRF)

Form-V

PROJECT COMPLETION REPORT (Submit in duplicate)

1.	Title of the project:
2.	Name & Designation of Principal Investigator:
3.	Name & Designation of Co- Principal Investigator/s:
4.	Duration of the project:
5.	Sanctioned grant:
6.	Date of initiation of the project:
7.	Date of closure of the project:
8.	Whether the Utilization Certificate and statement of expenditure has been submitted?Yes/No (If yes, mention the date and append the photocopy of the same) (If no, the reasons thereof)
9.	Approved objectives:
10.	Title of the research paper published from out of the current project work (If any, attach reprint)
11.	Title of the research paper accepted for publication from current research work (If any, attach

copy of acceptance letter)

12.	Report of the completed research project highlighting the deliverables (Attach document- Min. 3000 words)
13.	Details of the consumable and non-consumable (including equipment) material procured from current research project grant.
14.	Has the non-consumable material (including equipment) been handed over to the concerned department? Yes/No (If yes, attach a certificate issued by concerned HoD in this regard) (If no, the reasons thereof)
15.	Has the stock register carrying entries of consumable/ non-consumable (including equipment) handed over to the concerned department? Yes/No (If yes, attach a certificate issued by concerned HoD in this regard) (If no, the reasons thereof)
16.	Was power point presentation of the current research work made before DRPMC by PI/Co-PI? Yes/No (If yes, attach a certificate issued by concerned Dean/ HoD in this regard) (If no, the reasons thereof)

Comments of the concerned DRPMC		
Members of the concerned DRPMC		