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FORM-I

## UNIVERSITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

PÁRTIAL FUNDING TO ATTEND/PARTICIPATE NATIONAL/INTERNATIONAL (WITHIN INDIA) CONFERENCE/SEMINAR/ WORKSHOP/ BRAIN STORMING SESSION, ETC.

1.	Name	with	designat	ion
----	------	------	----------	-----

- 2. Department/Institute/Centre/Campus
- 3. Title of the Conference/Workshop/Seminar/Colloquium/ Brain Storming Session
- 4. Name of Institute/University/Organization holding the Conference/Workshop/ Seminar/ Colloquium/ Brain Storming Session
- 5. Presenting key note address/ Plenary session address/ Inaugural session address/ Presidential address/ research paper (strike off whichever is not applicable) and attach documentary proof to this effect
- 6. 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
- 7. Are organizers meeting part of the expenditure? Yes/ No
- 8. If yes, give details with documentary proof to this effect.
- 9. Request for partial fund

Travel (train only):

Registration fee

DA

Total

10. Has application for Duty Leave been submitted? Yes or No

11. Has Duty Leave been sanctioned? Yes

12. If yes, attach copy of the sanction letter.

Signature

Date:

#### UNIVERSITY OF JAMMU RESEARCH FUND

In case applicant is a bonafide Research Scholar, the following is mandatory

Recommendation of concerned Research Supervisor

Name & Signature of concerned Research Supervisor

Recommendations of the concerned HoD

Seal and Signature of concerned HoD

FORM - II

# UNIVERSITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

#### PROJECT SUBMISSION FORM

(Submit in Triplicate)

(office use) Project File Reference No. UoJRF/ year / deptt/centre/institute/ number (three digit)

1.	Name of the Principal Investigate	or:
2.	Designation:	3. Date of Birth
4.	Department/Center/Institute	
5.	Name of the Co-Principal Inves	igator
6.	Designation	7. Date of Birth
8.	Department/Center/Institute	
9.	Name of the Co-Principal Inve	stigator
10.	Designation	11. Date of Birth
12.	Department/Center/Institute	
13.	Title of the project (in bold)	
14.	Duration of the Project (24 n	nonths) From to
15	and I'm avooted	
	a) Consumables.	

Justification:

b) Equipment

Justification:

c) Travel (domestic & field)

Justification:

d) Contingency

Justification:

- e) Total funds requested
- 17. Requirement of any additional space from the department/ centre/university Yes / No If yes, give justification:
- 18. a. Total no. of ongoing projects with the PI Give details of on-going project/s 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
  - Total no. of projects completed by the PI
     Give details of completed project/s such as title, funding agency, total grant sanctioned, date of initiation, closure of the project and brief summary of completed project/s
- 19. Project Proposal

Title (in bold)

Summary (at least in 2500 words)

Objectives (not more than three)

Methodology (in bullets)

Schedule of work for 24 months (0-6 months, 7-12 months, 13-18 months and 19-24 months)

20. 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.

#### UNIVERSITY OF JAMMU RESEARCH FUND

		,
Name & Signature of the Principal Investigator		Date:
Name & Signature of the Principal Co-Investig	ator	Date:
Recommendations of the concerned DRC in car	se applied under Catego	ory I.1/ I.2
	-	
	Head of the departn	nent/Director of Center/Institute
Name & Signature of the Principal Co-Investig	ator	Date:
Recommendations of the concerned DRC in ca	se applied under Catego	ory I.3
	Head of the departmen	t/Director of Center/Institute
Name & Signature of the Principal Co-Investig	ator:	Date:
Recommendations of the concerned DRC in ca	se applied under Catego	ory I.3
	Head of the departmen	t/Director of Center/Institute

#### For Office Use Only

Project File Reference No. UoJRI	// year / deptt/centre/institute/ number (t	three digit)
Received on		
	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 fi	gures and words) , if approved	

Assistant/Deputy Registrar

#### UNIVERSITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

#### SANCTION LETTER

Project File Reference No. UoJRF/ year / deptt/centre/institute/ number (three digit)

To,

Dear	Prof./	Dr.	

has been approved by the Central Research Project Sc	crutiny Committe	ee (CRPSC) and sanctioned a
research grant of Rs. (Rupees		) towards the utilization
for the above referred research project for a period of The detailed break-up of the sanctioned grant is a) Consumables: b) Equipment: c) Travel (domestic & field): d) Contingency:	year ( as under	months).

You are requested to submit **PROJECT INITIATION FORM** to this office with intimation to the Finance Section.

The University of Jammu wishes all the best in your academic and research pursuit.

Yours faithfully,

Assistant/Deputy Registrar

### $_{\mbox{\scriptsize Note:}}$ Quote Project File Reference No. in all future correspondence.

- Copy to: 1. SSVC for information to Hon'ble Vice Chancellor
  - 2. Sr. PA to Registrar for information to Registrar
  - 3. Head/Convenor, BoS of the concerned department/s
  - 4. Concerned PI
  - 5. Concerned Co-PIs
  - 6. Office of Director, DIQA for information
  - 7.AR/DR, Academic Affairs for information

FORM - III

# UNIVERSITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

## PROJECT INITIATION FORM

(Submit in duplicate)

Project	File Reference No.	
1.	Name of the Principal Investigator with designation	
2.	Department/Center/Institute	
3.	Name of the Principal Co-Investigator with designation	
4.	Department/Center/Institute	
5.	Name of the Principal Co-Investigator with designation	
6.	Department/Center/Institute	
7.	Title of the project (as approved in sanction letter)	
8.	Tentative Duration of the Project From to	
9.	Details of grant sanctioned	
	a) Consumables:	
	b) Equipment:	
	c) Travel (domestic & field):	
	d) Contingency:	
10.	Date of Initiation of current Project	
I/We	certify that no civil/electrical modifications shall be carried out without the expr	ess permission of
the U	niversity Engineering Department and the Registrar. We will follow the norms	for the operation
of the	projects framed from, time to time, by the University.	
		Date:
Name	e & Signature of the Principal Investigator	Detail
Name	e & Signature of the Principal Co-Investigator	Date:
		Date:
Name	e & Signature of the Principal Co-Investigator	HoD)
	to Finance Section & concerned	HUD)

(Submit a copy of duly filled in form to Finance Section & concerned HoD)

FORM-IV

# UNIVERS ITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

#### SIX MONTHLY PROGRESS REPORT

(Submit in duplicate)

Project File Reference No.	
1. Title of the project:	
2. Name & Designation of Principal Investigator	
3. Name & Designation of Principal Co-Investigator	
4. Name & Designation of Principal Co-Investigator	
5. Duration of the project	
6. Sanctioned grant	
7. Date of Initiation of the project	
8. Objective/s achieved	
9. The amount of research work completed in the current project (in at least 1500	words)
10. The amount of research work to be completed, in next six month schedule project (in at least 1000 words)	e, in the current
11. Deliverables, if any	
Comments of the concerned DRC	
Members  Head of the concerned Departn	nent

FORM-V

## UNIVERSITY OF JAMMU UNIVERSITY OF JAMMU RESEARCH FUND

## PROJECT COMPLETION REPORT

(Submit in duplicate)

(Submit in duplicate)
Project File Reference No.
1. Title of the project:
Name & Designation of Principal Investigator
Name & Designation of Principal Co-Investigator
4. Name & Designation of Principal Co-Investigator
5. Duration of the project
6. Sanctioned grant
7. Date of Initiation of the project
8. Date of Closure of the project  9. Whether the final utilization certificate and statement of expenditure has been submitted
Yes/ INO
10. If yes, mention the date and append the photocopy of the same.
11. If no, the reasons thereof.
12. Summary of the project proposal (at least 1000 words)
13. Approved Objectives
13. Approved Objectives  14. Title of the Research paper published from out of the current project work (attach reprint)

- 15. Title of the Research paper accepted for publication from out of the current research work (attach copy of acceptance letter)
- 16. Report of the completed research project highlighting the deliverables (at least 3000 words)
- 17. Details of the consumable and non-consumable (including equipment) material procured from out of the current research project grant
- 18. Has the non-consumable material (including equipment) been handed over to the concerned department?

  Yes or No
- 19. If yes, attach a certificate issued by concerned HoD in this regard.
- 20. If no, the reasons thereof.
- 21. Has the stock register carrying entries of consumable /non-consumable (including equipment) handed over to the concerned department? Yes or No
- 22. If yes, attach a certificate issued by concerned HoD in this regard.
- 23. If no, reasons thereof.
- 24. Was power point presentation of the current research work made in the concerned department by PI/Co-PI? Yes or No
- 25. If yes, attach a certificate issued by concerned HoD in this regard.
- 26. If no, the reasons thereof.

Comments of the concerned DRC

Members of DRC

Head of the Department