

**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
7. Name of PI, Co-PI and Organisation

**B. IDENTIFICATION**

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

2. Programme applied for :

STARD	S&T for Women	STAWS
SYS	S&TPSNSCP	ETGS&T

3. Details regarding :

- (a) Profile of Project area
- (b) Target Population (SC, ST, Women)
- (c) Direct Beneficiaries.

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 \_\_\_\_\_

- 1.1 Name of Co-Investigator :
- 1.2 Designation :
- 1.3 Department :
- 7.4 Sex (M/F)
- 7.5 Organisation/Inst. Name:
- 7.6 Address: \_\_\_\_\_  
 \_\_\_\_\_ Pin \_\_\_\_\_  
 Telephone .....Fax.....Email.....

2. 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

Title of The project	Year of start and completion	Project cost	Name of sponsoring Organisation
_____	_____	_____	_____
_____	_____	_____	_____

**C. PERFORMA FOR BIO-DATA 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

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Sl. No.	Title of Project	Duration From to	Total Cost	Funding Agency
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(2) List of projects submitted

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Sl. No.	Title of the project	Name of Organisation	Status
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**D. 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 (*Please make these brief and preferably quantifiable. Referees are asked to comment on these and they will form part of the sanction, if project is approved*)

4. Report of preliminary investigation conducted (if any) (300 words)
5. Implementation strategy covering aspects such as:
  - (a) Information about local economy, relevant artisanal 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 following the format: -
 

Name of scientist	Area of specialization
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  - (d) Details of the project implementation site including details of relevant GIS data employed (please indicate source)
6. Work Plan :
  - (a) Phasewise plan of action including consultation with the target group, resource persons etc.including post project activities.
  - (b) Time schedule of activities giving milestones.
7. Techno-economic viability/cost benefit analysis (to include cash flow, working capital management, pay back period etc.)
8. Comment on the likely impact on adjoining areas/society.
9. Comment on the possibilities of the activity becoming self-sustainable.
10. Suggested parameters for monitoring effectiveness of intervention during and after the project.

**E. BUDGET**

BUDGET ESTIMATES: SUMMARY

(In Rupees)

Item	Budget			
	Ist year	2nd Year	3rd Year	Total
A. Recurring				
1. Manpower				
2. Consumables				
3. Travel				
4. Contingencies				
5. Institutional Overheads				

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B. Non-Recurring  
Permanent equipment

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Grand Total (A+B)

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

#### BUDGET FOR MANPOWER

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Designation (Number of persons)	Monthly Emoluments	BUDGET			
		Ist yr. (m.m.)	2nd Yr. (m.m.)	3rd Yr. (m.m.)	Total (m.m.)

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Full time

Part Time

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Total

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\*m.m: Man months to be given within brackets before the budget amount.

#### BUDGET FOR CONSUMABLES

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Description	Budget			
	Ist year	2nd Year	3rd Year	Total

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Items

Total

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BUDGET FOR TRAVEL

Item	Budget			
	Ist year	2nd Year	3rd 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.

**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) Copy of proposal on floppy 1.44 MB diskette	One
(d) 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:.....