**SECTION – ‘A’**

**Name of the Principal Investigator**: …………………………………………………………………………………………………….

Designation:…………………………………………………………. Department…………………………………………………………

YYYY

MM

YYYY

DD

MM

DD

**Date of Joining Date of Retirement**

**Title of the Proposal**: …………………………………………………………………………………………………………………………..

………………………………………………………………………………………………………………………………………………………......

…………………………………………………………………………………………………………………………………………………………….

Study Design ……………………………………………………….………………………………………………………….… (Any other)

Duration of Study……………………………………………………………………………..………… (Kindly attach Gant Chart)

Fund Required: Rs. …………………………………. (In words)…………………………………………………………………………..

**Details of Co – Investigator (within Institute)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl. No.** | **Name**DesignationDepartment | **Contact** **Details**Mobile NumberEmail Id | **Role and Responsibilities allotted** | **Signature** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Details of Co – Investigator** (from outside the Institute) (Prior approval of Research Cell should be obtained)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl. No.** | **Name****Designation****Department** | **Institute** | **Contact Details****Mobile Number****Email Id** | **Role and Responsibilities allotted** |
|  |  |  |  |  |
|  |  |  |  |  |

**SECTION – ‘B’**

**DETAILS OF PREVIOUS INTRAMURAL PROJECTS:**

Title of the Previous study: ……………………………………………………………………………………………………………….…

.……………………………………………………………………………………………………………………………………………………………

.……………………………………………………………………………………………………………………………………………………………

Date of Study approved: ………………………………………………………………………. (attach IEC Approval Letter)

Date of Completion: ……………………………………………………………………… (Submit Completion Certificate)

Amount Granted: Rs. ……………………………........... (in words)………………………………………………………………….

Details of Publications made: ……………………………………………………………………………………………………………..

…………………………………………………………………………………………………………………………………………………………….

…………………………………………………………………………………………………………………………………………………………….

**(SELF DECLARATION)**

I ………………………………………………………………………...(Name) …………………..………………………….(Designation)

………………………………………………………………………………….(department) do hereby affirm the following:

1. I will strictly abide by the rules and guidelines of Institute Intramural Fund Allocation Committee as per SOP.
2. I will inform the Research Cell when the Manuscript is accepted / published.
3. The fund allotted will only be utilised for purchase of consumables.
4. No Senior/Junior Residents, PhD Students, Research Associates, Undergraduate or Postgraduate students and Para-Medical staff are Co-Investigator in the above mentioned Proposal.

………………………………………………………….

Signature of the Principal Investigator

**CHECKLIST**

|  |  |  |
| --- | --- | --- |
| **Sl. No**. | Particulars | **Tick** |
| 1 | IEC and RAC Forms with the study proposal |  |
| 2 | PIS & PICF in Both English and Regional Language |  |
| 3 | Detailed Budget (On a separate paper) |  |
| 4 | A copy of RC/price details for any assets/investigation/pharmacy/consumables available in the institute (if applicable) |  |
| 5 | A copy of technical details/specifications and quotations from the GeM portal or any other reputed vendors for purchasing any assets/service/consumable/ pharmacy items not available in the institute (if applicable) |  |
| 6 | Undertaking stating the proposal will not be sent for funding to any other agency (extramural funding) |  |
| 7 | Statistical Input taken or not |  |
| 8 | Undertaking from the Co-PI of the same department stating that he/she will take the responsibility to complete the project due to unavoidable circumstances. |  |
| 9 | CV of all the Investigators |  |
| 10 | Copy of clinical trial protocol (if applicable) |  |
| 11 | Gant Chart |  |

Note: Mention ‘NA’ if not applicable. After acceptance of the proposal, the PI has to submit one shadow file to the Institute Intramural Fund Allocation Committee (IIMFAC).