**JAMAL MOHAMED COLLEG (Autonomous)**

**Tiruchirappalli - 620020**

**APPLICATION FOR SUBMISSION OF RESEARCH PROPOSAL BY   
THE FACULTY MEMBERS UNDER SEED MONEY GRANT**

**Part – A**

|  |  |
| --- | --- |
| Title of research proposal |  |

Personal Information

|  |  |
| --- | --- |
| 1. Name & Employee No |  |
| 2. Age & Date of Birth |  |
| 3. Designation |  |
| 4. Qualification |  |
| 5. Department |  |
| 6. Area of Specialization |  |
| 7. Contact No |  |
| 8. E-mail ID |  |
| 9. Aadhar Number |  |

**Part – B**

|  |  |
| --- | --- |
| 1. Abstract  (250 words in single space) |  |
| 2. Back ground information  (State of art in brief - 1 Page) |  |
| 3. Review of literature  (2 Page) |  |
| 4. Objectives  (Maximum 3 points) |  |
| 5. Technical programme  (Quarter wise work details) |  |
| 6. Expected outcome of the project  (1 Page) |  |
| 7. Duration: 1 year  (Extendable up to 2 years based on the recommendation of the review committee) |  |
| 8. Budget details  (Should not exceed Rs. 50,000) |  |
| 9. Nature of project: Individual / Interdisciplinary/ Multidisciplinary  (Indicate the name of collaborator’s in the case of interdisciplinary and multidisciplinary projects) |  |

Date: Signature of the Applicant

Tiruchirappalli – 620 020.

Recommended/ Not Recommended

**HOD / MID PRINCIPAL**