Proforma for Submission of Project Proposal under Niche Area of Excellence

(Give separate one-page summary at the beginning of proposal)

		ì	-	•		•			_	_			
1. Nam	ne of the	Univer	sity:										
2. Nam	e of the	Niche A	Area:										
3. If the	e area is	Multidi	sciplinary:										
4. Reas	ons for s	selecting	g the Niche	Area	ı:								
5. Exist	ting stren	ngth in t	the Niche a	rea:									
5.1 Past	t achieve	ements	of the PI										
	(a) Rese	arch Pr	ogrammes (comp	leted/in	operati	on						
	Prograi		Goal Da		of of		Costing				Indicate y	our role (PI/Co-PI)	
	Title			sta	rt/comp	letion			Agen	ıcy			
	(b) Publications (Peer reviews Authors (s) name. Y (NAAS rating). (c) Patents (if any) Title Application /publication number		ne. Ye	Year of publication). Date of applicat			Pro	Journal's resent Inc		name, volume, page number. ndicate your role (1st/2nd/3rd/			
	(d) Tec	hnolog	ies generate	-d									
			Number	of	Status		D	even	110		Your rol	e in technology	
	Name of the technology		beneficiary		(commercialized or not)				erated (Rs.				
	(a) Dan	ources	available		1		I						
				Nur	.1	Unit	4	V		- C	E 1:	Present status	
			ne major	IN UI	nber					of	Funding	Present status	
	equipm	nents/fac	cilities			(Rs. lakh)	in	proc	ureme	nt	source		
												1	

 $(f) \quad Students \ completed \ M.Sc.\ /M.\ V.\ Sc.\ /Ph.\ D$

	Employment profile of alumni Awards/recognition									
	Award name	Date of a	ward Host institution	Purpose of	the Award					
(a) (b)	y included in the Within the Depa Outside the Dep Outside the Univ	rtment artment	th one page bio-data for each	as an Annexure)						
Suppor	rting staff availab	le in the Niche	Area							
Infrast work)		ents and other t	facilities available (particula	rly, in support o	of the proposed					
	e of the major eq	uipments/facilit	ies	Number	Status					
oposa	l in Support of N	iche Area								
Goal										
Object	ives									
•										
ntrodu Fechni	cal programme									
S. No	o. Activitie	es	Quarter	Respon	sibility (PI/Co-P					
S. No	o. Activitie	es	Quarter	Respon	sibility (PI/Co-P					
			Quarter	Respon	sibility (PI/Co-P					
Activit	ty milestones (yea	arly)	Quarter							
	ty milestones (yea	arly)	Quarter							
Activit	ty milestones (yea	arly)	Quarter		sibility (PI/Co-P					
Activit Year	ty milestones (year Mileston	arly)	Quarter							
Activit Year Monito	ty milestones (year Mileston	arly) nes	Quarter							
Activit Year Monito	y milestones (year Milestones orable targets	arly) nes ities required:		Respon	sibility (PI/Co-P					
Activit Year Monito Major Nam	milestones (year Milestones) Drable targets equipments/facilities of the major	arly) nes	Need & justification in conforthe proposed work	Respon text Alternate	sibility (PI/Co-P					
Activit Year Monito Major Nam	y milestones (year Milestones orable targets	arly) nes ities required: Unit cost	Need & justification in con	Respon text Alternate	sibility (PI/Co-P					

6.8 Budgetary requirements

S. No.	Particular	Amount in lakh)	(Rs.	Brief Justification (Details separately)
Α.	Recurring (Research & Operational Expenditure	e)		
i.	TA (Participation in national Seminar/workshops etc)			
ii.	RA/SRF			
iii.	Operational expenses (Manpower, Chemicals, glassware's etc)			
B.	HRD	<u>I</u>		
iv.	Organization of trainings [Provide schedule (tentative) in separate table]			
C.	Non-recurring	I.		
v.	Equipments (with justification)			
vi.	Works (renovation/refurbishing including furniture of laboratory etc)			
vii.	Others (software/animals, etc.)			
	Total			
		1		

6.9	Expected	outcome	for the	stake	holders	at the	end	of the	project	:
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- (a) For the country
- (b) For the state
- (c) For the region
- (d) For the university
- (e) For students
- (f) For farmers
- (g) For agribusiness management/industries

6.10 Sustainability of programme after completion:

- (a) For the country
- (b) For the state
- (c) For the region
- (d) For the university
- (e) For students
- (f) For farmers

	he Co-PIs (Name, designation, complete nnexed separately)	address, e-mail, mobile no., etc. One page bio-				
(a) Nar	signation dress ephone	parately)				
	CHECK LIST If Yes please ti	ck ($$) if No please (X)				
A	Submission of Demand/ Proposal as per for	rmat				
В	UC/AUC of Previous Financial Year					
C	C Printed Annual Reports as per format					
D	Head Wise Expenditure in Annexure					
		Signature:				
		Name:				
		Designation:				
		Address:				
Date:						
Place:						