

Instructions to fill form; please delete after proposal completion

1. Form is best filled in MS Word 2016 and above. It contains Quick Parts for automatic filling.
2. Read the entire form and fill
3. Make PDF before submission

12-Jul-24

Complete Title of the Project

Subtitle – Optional

Submitted By



PI – Prof Principal Investigator Name

Institute Name

Department Name,
Street Name and other address
City, State and Pin Code

In Association with

DIA COE Institute Name

Research Vertical

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Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Guidelines to Fill Project Proposal Forms

Summary of the proposal

- Title of proposal must be short and should encapsulate the main objective.
- PI should provide 4-5 keywords which will help in classification

Detailed Cost Break-up

- Staff: Indicate here numbers and categories of staff proposed to be engaged. The current emoluments should be as per DST / Institute norms. HRA will be payable as per Govt. rules.
- Equipment (including spares thereof): Details of proposed equipment(s), quantity, costing, and source along with justification to be given against each item of detailed form 5C.
- Operation and maintenance of equipment: Include here the proposed outlays on service contracts for maintenance of equipment beyond guarantee period; upkeep of animal houses; items essential for safe operation of equipment e.g. essential periodic replacement of furnace linings, pump bearings, etc.
- Expendables: Chemicals, Glass Wares, Electronic components, raw materials and other consumables.
- Workshop: specific to the project for knowledge dissemination.
- Travel: Details in proposal should show the purpose of travel. The Domestic travel cost shall be 2% of project cost or Rs. 85,000/- per person per year for the 2/3rd of the total manpower in the project, whichever is less.
- Contingencies: Includes office supplies, local transport, telephone/fax expenses, postage, etc. but should not include procured services. Contingencies should be limited to maximum 3% of the project cost.
- Visiting Faculty or Research Consultants: Purpose of having consultancy should be well defined. Enter total annual remuneration in year-boxes. (Brief bio-data of proposed Visiting Faculty or Research Consultants must be included in the proposal.)
- Procured services (other than contingencies) and metered utilities: Include here any charges for separately metered power consumed by heavy equipment (e.g. furnaces, compressors, etc.); commercial sample-testing; certification charges; charged time on shared or hired equipment outside the host institution and expenses towards advertising for equipment and recruitment of staff
- Industry/ Startup Research: Startup/ Industry research participation required in the project. Stage of industry engagement should be clearly defined.
- Overhead expenditure: will be as per approved norms.

Certificate: Should get the signature and seal of Applicant PI and Administrative Authority.

Please send signed hard copy of proposal by Speed Post (Not Courier)/hand to:

The Director
 Directorate of Futuristic Technology Management (DFTM)
 Defence Research & Development Organization (DRDO), Ministry of Defence
 3rd Floor, DRDO HQrs Annexe, Metcalfe House, Delhi -110054
 Ph: 011 – 23902763

Signature: Director – DIA COE Institute
 Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

General Guidelines

- A deeper thought process while giving the proposals.
- Prevent incomplete information.
- Strengthen pre-project stage activities.
- Start the work with end in mind.
- High end equipment, large facilities without a long term plan will be a burden and hence shall utilize the existing facilities.
- Adequate assessment (availability, alternate facility/ time slots) of test facilities in Statement of Case (SoC)/ Research Proposals.
- Formulation of comprehensive specification & requirement for imported components/ sub-systems/ system during pre-project activities.
- Annual Conference for internal dissemination of knowledge & collaboration.
- Inclusion of comprehensive checklist to identify and manage technical risks for the research projects.
- Inclusion of Technical and Administrative closure as a project milestone.
- Adequate planning and communication of Infrastructure upgradation and maintenance activities.
- Detailed global benchmarking (technical, features, applications, output performance) with similar projects at project evaluation stage.
- Attachments (if any) to be given as Annexure A, B....
- Repetition to be avoided at all stages, refer to the sections having information instead.

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

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Project Proposal Checklist

- The proposal form is to be filled in stages as given on the submission schedule column. The researcher may however understand the entire form to anticipate current and future submission requirements. Please read the form carefully and contact DFTM in case of any queries.
- The following table is the checklist of submission.
- Please tick mark the forms being submitted on the given date. Re-submitted (revised) forms may be given a suitable version number.
- The forms are automated with the dropdowns and checkboxes. The automation provided in the forms work on Microsoft Word 2016 and above.
- All can be submitted at once also, if ready.

| SNo | Form No | Title | Submission Schedule (Mandatory Requirements) |
|-----|-----------------|---|--|
| 1. | Form 1* | Summary of Proposal – Basic Information | Pre TEC |
| 2. | Form 2* | Technical Brief | Pre TEC <i>Can be revised based on RAB and GC recommendations.</i> |
| 3. | Form 3A | Lab Recommendation (Initial) | Pre TEC |
| | Form 3B | Lab Recommendation (Final) | Post GC |
| 4. | Form 4* | Extended Technical Details | Pre TEC <i>Can be revised based on RAB and GC recommendations.</i> |
| 5. | Form 5A* | Detailed Cost Breakup | Pre TEC <i>Can be revised based on RAB and GC recommendations.</i> |
| | Form 5B | Manpower Detailed Justification | Pre RAB <i>Can be revised based on RAB and GC recommendations. Pre GC & Post GC</i> |
| | Form 5C | Equipment Details | |
| | Form 5D | Details of Expendables | |
| | Form 5E | Details of Procured Services | |
| | Form 5F | Cost Estimation for Expendables | |
| | Form 5G | Cost Estimation for Research Staff | Post GC / Final Proposal |
| | Form 5H | Cost Estimation for Proposed Equipment | |
| | Form 5I | Cost Estimation for Contingency | |
| | Form 5J | Cost Estimation for Travel | |
| 6. | Form 6A | PI Details Multiple 6A's can be submitted one for each PI | Post GC / Final Proposal |
| | Form 6B | Industry/ Startup Co-PI Details Multiple 6B's can be submitted one for each industry | |
| 7. | Form 7A* | Certificate of Project Submission | Post GC / Final Proposal |
| | Form 7B* | Cost Reasonability Certificate | |
| | Form 7C* | HRA Certificate | |
| | Form 7D* | Certificate of Commercial Use | |
| | Form 7E* | Life Sciences Project Certificate | |

***For financial sanction the forms to be countersigned by Administrative Authority as nominated by head of Institute at final submission**

Abbreviations: Technical Evaluation Committee (TEC), Governing Council (GC), Research Advisory Board (RAB), Principal Investigator (PI), Non-Resident Indian (NRI), Overseas Citizenship of India (OCI)

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Form 1: Summary of Proposal

| | | | | |
|-----------------------------------|--|--|------------------|-----------------|
| 1. | Project Title | Complete Title of the Project | | |
| 2. | Proposal Type (Choose Dropdown) (Laboratory Demo/ Prototype Development/ Technology. Translation/ Operational Strategies/ Study, Simulation and Experimental Validation) | Choose an item. | | |
| 3. | Key words (4-5) Technology, Deliverables, Science, Area of research | | | |
| 4. | Reference Project (Dropdown) (New/ Followup) | Choose an item. | | |
| 5. | Name of PI | Prof Principal Investigator Name | | |
| 6. | Contact Details of PI | +91 9999999999, abc@iitx.ac.in | | |
| 7. | Institute Name | Institute Name | | |
| 8. | Institute Type (Dropdown) (Government Academic/ Government Research/ Private Academic/ Private Research/ Others) In case of 'Others' please specify | Choose an item. | | |
| 9. | Project Duration (months) | | | |
| 10. | Cost (Rs Lakhs) | ₹ | | |
| 11. | Stakeholder DRDO Lab | | | |
| 12. | DIA CoE (Liaison Institute – approved CoE) | DIA COE Institute Name | | |
| 13. | Collaborating Institute Co-PI Details (Can add more rows if required) | Write NIL if no collaboration | | |
| | | Name | Institute | Sanction |
| | | Co-PI 1 | | Yes/ No |
| | | Co-PI 2 | | Yes/ No |
| Co-PI 3 | | Yes/ No | | |
| 14. | Industry Collaboration (Dropdown) (Yes/ No) If yes, Name & type of Industry (Can add more rows if required) | Write NIL if no collaboration Choose an item. | | |
| | | Name | Type | Sanction |
| | | Industry 1 (Start-up/ MSME/Other) | Choose an item. | Yes/ No |
| | | Industry 2 (Start-up/ MSME/Other) | Choose an item. | Yes/ No |
| Industry 3 (Start-up/ MSME/Other) | Choose an item. | Yes/ No | | |

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

| | | | |
|-----|--|---|---|
| 15. | International Collaboration (Yes/ No) | Choose an item. | |
| | Collaborating PI | | |
| | Collaborating Institute Name | | |
| | QS world Univ. Ranking | | |
| | Collaborating Institute Department | | |
| | QS Ranking of the Department | | |
| | Collaborating Institute Country | | |
| 16. | Deliverable Artefacts (click on the box, multiple choices can be selected by the PI. For others, please write what is being offered.) | <input type="checkbox"/> Dataset <input type="checkbox"/> Simulation <input type="checkbox"/> Standard <input type="checkbox"/> Others | <input type="checkbox"/> Prototype <input type="checkbox"/> Process & Methodology <input type="checkbox"/> Research facility <input type="checkbox"/> Source Code/ Algorithm |

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Form 2: Technical Brief

Please do not change the numbering below

1. Aim of Research Proposal

Write in brief the aim of proposal. Please make it short with on paragraph only.

2. Objectives

(Add more rows at the end for more objectives)

2.1. Objective 1

2.2. Objective 2

3. Deliverables

(Add more rows at the end for more deliverables)

3.1.

3.2.

4. Milestones (Give milestones with timelines)

(Add more rows at the end for more milestones)

4.1.

4.2.

4.3.

4.4.

Final milestone should be Completion of Project, submission of final project report in Word and PDF format along with closure presentation

5. Global Reference papers in the area (State of Art) (Top 2 nos)

5.1.

5.2.

6. Global Reference patents in the area (Top 2 nos)

6.1.

6.2.

7. Ongoing projects/consultancy work with DRDO Labs/ other organisations in the given technical area

(Funding Agency, Title, Cost, Duration, Year of sanction, Status – Completed/ongoing, if completed provide year of completion)

(Add more rows at the end)

7.1. Project 1

7.2. Project 2

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

8. Novelty/ Innovation of Research

8.1. Innovation 1

8.2. Innovation 2

9. Technical Challenges

Write here.

10. Relevance to DRDO

Write here.

11. Risk Analysis & Mitigation Pathways

(Add more rows at the end for more risks)

| Risks | Mitigation Pathways |
|--------|---------------------|
| Risk 1 | |
| Risk 2 | |

12. Work Share / WBS of PI, Lab, Industry and Foreign Co-PI

Define macro details of the workshare. Full details to be given in a separate research proposal document at the end of this form.

(Add more Columns for more partners/ Add more rows for more tasks)

| Task | PI | Lab | Co-PI 1 | Co-PI 2 |
|--------|----|-----|---------|---------|
| Task 1 | | | | |
| Task 2 | | | | |

13. Data/Input Requirements from DRDO

(Define macro details of the inputs. Add more rows at the end if required)

13.1. Input data like CAD

13.2. Input data like testing results

13.3. Material properties

13.4. Equipment functioning

14. Brief of Equipment/ Facility Requirement (from DRDO, existing infrastructure, Industries/ other facilities in country/ international)

(Define macro details of the facilities)

14.1. Equipment for testing

14.2. High performance computing

14.3. Flight test facility

15. Initial Thoughts on Project Outcomes Utilization Pathway

Choose an item.

Enter comments.

Signature: Director – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

Form 3A: Lab Recommendation- Initial

| | | |
|----|--|---|
| 1. | Lab Name | |
| 2. | Project Title | Complete Title of the Project |
| 3. | Technical Application (Details in 1-2 lines) (Tick the applicable items) | <input type="checkbox"/> Component <input type="checkbox"/> Subsystem <input type="checkbox"/> System <input type="checkbox"/> Material <input type="checkbox"/> Process <input type="checkbox"/> Support tools <input type="checkbox"/> Codes for Simulation <input type="checkbox"/> Software <input type="checkbox"/> Others (specify) |
| 4. | Names and Designation of Collaborating Scientists | 1. 2. 3. 4. |
| 5. | Alignment with Roadmap/ Programme (dropdown) (Yes/ No) | Choose an item. |
| 6. | Concurrence to point 13 & 14 of Form 2 | |
| 7. | Detailed Comments on the Proposal | |
| 8. | Comments on Industry Association | |

- Continuous interactions will be taken up with PI to meet the timelines and for concluding the technical outcomes.
- Data sharing will be done with PI and research teams formally with information to DFTM.
- Details of the project relevant to development of Component/ Subsystem/ System/ Raw Material/ Others to be specified and linked with the proposed /ongoing lab activity.

(Coordinating Scientist)

(Lab Director)

Form 3B: Lab Recommendation- Final

| | | |
|----|--|---|
| 1. | Lab Name | |
| 2. | Project Title | Complete Title of the Project |
| 3. | Project Outcome Utilization Plan | <input type="checkbox"/> Absorption by DRDO lab <input type="checkbox"/> ToT to Industry <input type="checkbox"/> Prototype development with Industry Collaboration |
| 4. | Detailed Comments on the Project after TEC, RAB & GC Deliberations | |
| 5. | Recommendations on the Project Outcomes and Artefacts submitted | |
| 6. | Recommendations on the Equipment and Facility created as part of the project | |
| 7. | Comments on Industry Association | |

- Continuous interactions will be taken up with PI to meet the timelines and for concluding the technical outcomes.
- Data sharing will be done with PI and research teams formally with information to DFTM.

(Coordinating Scientist)

(Lab Director)

Note: This is to be submitted after after GC approval.

Form 4: Extended Technical Details

| | | | |
|----------------------------------|----------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Pre TEC | <input type="checkbox"/> Pre RAB | <input type="checkbox"/> Pre GC | <input type="checkbox"/> Post GC |
|----------------------------------|----------------------------------|---------------------------------|----------------------------------|

| | |
|-----------------------------|--|
| Title | Complete Title of the Project |
| PI, Institute | Prof Principal Investigator Name , Institute Name |
| Coordinating DIA CoE | DIA COE Institute Name |
| Research Vertical | Research Vertical |

1. Technology Description

Write here.

2. Key Technology Challenges

Write here.

3. State of Art (National)

Write here.

4. State of Art (International)

Write here.

5. Figures of Merit (FoM)

(Add more rows at the end)

| Property | Parameter | Targeted Value | International value | Measurement Methodology |
|----------|-----------|----------------|---------------------|-------------------------|
| | | | | |
| | | | | |

6. Competence Level/ Previous work done in this area or related field

(Add more rows at the end)

6.1. Publication in this field by the PI

7. Role of Industry (if applicable)

| Role of Industry | Workshare | Justification |
|------------------|-----------|---------------|
| | | |

8. Application of Technology

(Add more rows at the end)

8.1.

9. Technical Plan/ Methodology (Brief) (Attach)

(Detailed technology plan to be provided in a separate document and to be attached at the end of document)

10. PERT Chart Highlighting Critical Path (Attach)

(Gantt Project or Project Libre open-source software may be used.)

11. Equipment/ Facilities Required

(Add more rows at the end if required)

| S. No | Name of Equipment | Quantity | Cost | Source country |
|-------|-------------------|----------|------|----------------|
| | | | | |
| | | | | |

12. Equipment/ Facility available with Academia/ Industry for the Project

(Add more rows at the end if required)

| SNo | Name of Equipment | Available Quantity | Serviceable / Unserviceable | Source country |
|-----|-------------------|--------------------|-----------------------------|----------------|
| | | | | |
| | | | | |

13. Equipment/ Facility available with DRDO for the Project

(Add more rows at the end if required, Inputs may be sought from DRDO)

| S. No | Name of Equipment | DRDO Lab/ Estt |
|-------|-------------------|----------------|
| | | |
| | | |

14. Equipment/ Facility Available Within Country for the Project

(Add more rows at the end if required, Inputs may be sought from DRDO and Other researcher community in the field)

| S. No | Name of Equipment | Institute where Equipment Available | Location |
|-------|-------------------|-------------------------------------|----------|
| | | | |

15. Procured Services Required (available within country/ abroad)

(Add more rows at the end if required)

| S. No | Type | Approx. Cost | Source Country |
|-------|------|--------------|----------------|
| | | | |

16. List of Expendables (available within country/ abroad)

(Add more rows at the end if required)

| S. No | Name of Expendables | Cost/ Unit | Source Country |
|-------|---------------------|------------|----------------|
| | | | |

Form 5A: Financial Details

Series 5 forms to be filled by each PI/ Co PI (including Industry) separately
Individual and consolidated forms to be submitted

| | | | |
|-----------------------------|--------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> PI | <input type="checkbox"/> Co PI | <input type="checkbox"/> Industry | <input type="checkbox"/> Consolidated |
|-----------------------------|--------------------------------|-----------------------------------|---------------------------------------|

| | | | |
|----------------------------------|----------------------------------|---------------------------------|----------------------------------|
| <input type="checkbox"/> Pre TEC | <input type="checkbox"/> Pre RAB | <input type="checkbox"/> Pre GC | <input type="checkbox"/> Post GC |
|----------------------------------|----------------------------------|---------------------------------|----------------------------------|

Cost Break-up (Refer Cost Projection Guidelines)

| Proposed Expenditure on ↓ (Rs in Lakhs) During → | Year 1 | Year 2 | Year 3 | Line Total |
|---|--------|--------|--------|------------|
| 1. Research Manpower | | | | |
| 2. Equipment (including spares thereof) | | | | |
| 3. Equipment Operation & Maintenance | | | | |
| 4. Expendables | | | | |
| 5. Workshop/Conferences | | | | |
| 6. Travel | | | | |
| 7. Contingencies | | | | |
| 8. Visiting Faculty or Research Consultant(s) | | | | |
| 9. Procured services (other than (7) and metered utilities) | | | | |
| 10. Institutional overheads (as per approved norms) | | | | |
| <i>Column Totals</i> | | | | |

Total Cost of the Project will be ₹ _____ (in words) only (₹ _____).

Form 5B: Manpower Detailed Justification

Manpower Detailed Justification

(DST approved posts can be included in the type of manpower)

(Add more rows at the end if required)

| Type | Number | Work Allocation |
|--------------------------------------|--------|-----------------|
| SRF | | SRF1 |
| | | SRF2 |
| JRF | | JRF1 |
| | | JRF2 |
| PA | | PA1 |
| | | PA2 |
| RA | | RA1 |
| | | RA2 |
| Others (Internship/ Hackathon) | | |

Senior Research Fellow (SRF), Junior Research Fellow (JRF), PA (Personal Assistant), Research Assistant (RA) to be given salaries as per approved published norms of GoI/Institute/DST/CSIR.

| S No | Researcher (JRF/SRF/RA/PA/Others) | Salary Per month | HRA | Total (Salary & HRA)/Month | Yearly & Increment (if Applicable) | Nos of researchers | Total/Year (Lakhs) |
|------|-----------------------------------|------------------|-----|----------------------------|------------------------------------|--------------------|--------------------|
| 1 | SRF | | | | | | |
| 2 | JRF | | | | | | |
| 3 | RA-I | | | | | | |
| 4 | RA-II | | | | | | |
| 5 | RA-III | | | | | | |
| 6 | Project Associate | | | | | | |
| 7 | Internship/ Hackathon | | | | | | |

Form 5C: Equipment Details

Equipment Detailed Justification

(Add more rows at the end if required)

| S. No | Name of Equipment | Quantity | Cost | BQ | Source Country (OEM & Supplier) | Justification |
|--------------|--------------------------|-----------------|-------------|-----------|--|----------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Long Term Utilisation of the Equipment

(Plan for long term utilization to be given)

Write Here

Form 5D: Details of Expendables

List of Expendables

(Add more rows at the end if required)

| SNo | Name of Expendable | Cost/ Unit | BQ | Source Country (OEM & Supplier) | Justification |
|------------|---------------------------|-----------------------|-----------|--|----------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Form 5E: Details of Procured Services

List of Procured Services

(Add more rows at the end if required)

| SNo | Type of Services | Cost | BQ | Source Country | Justification |
|------------|-------------------------|-------------|-----------|-----------------------|----------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Form 5F: Workshop/ Conference

Workshop/ Conference Justification

(Add more rows at the end if required)

| S.No. | Title | Cost | Justification |
|--------------|--------------|-------------|----------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Form 5G: Cost estimation for Expendables (Post GC)

Cost Estimation for Expendables

(Based on available Information to the extent possible)

(Add more rows at the end if required)

| SN | Description | Qty | Estimation based on SO/BQ/GeM/ Own estimate) | Year of Ref | Currency | Exchange Rate | Cost in without taxes (Rs. Lakh) | GST | Custom Duty | Other charges | Total Cost with taxes (Lakh) | Details of BQ/ Previous purchase | Cost proposed | Ref. Page no. |
|----|-------------|-----|--|-------------|----------|---------------|----------------------------------|-----|-------------|---------------|------------------------------|----------------------------------|---------------|---------------|
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |

Form 5H: Cost Estimation for Research Staff (Post GC)

Cost Estimation for Research Staff

(As per approved and published norms of GoI/ DST/ CSIR/ Institute)

(Add more rows at the end if required)

| | Research Staff Post | No. | Monthly remuneration | HRA @.... | Total | Yearly Remuneration | Yearly Increment | Y1 | Y2 | Y3 | Y4 | Y5 | Total |
|----------|----------------------------|------------|-----------------------------|------------------|--------------|----------------------------|-------------------------|-----------|-----------|-----------|-----------|-----------|--------------|
| 1 | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | |

Signature: DIA COE – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Form 5I: Cost Estimation for Proposed Equipment (Post GC)

Cost Estimation for Proposed Equipment

(Add more rows at the end if required)

| S. no. | Equipment | Qty | Estimation based on SO/BQ/GeM/ Own estimate) | Year of Reference | Currency | Exchange Rate | Cost without taxes (Rs. Lakh) | in GST | Custom Duty | Other charges | Total Cost with taxes (Lakh) | Details of BQ / Previous purchase | Cost proposed by PI | Ref. Page no. |
|--------|-----------|-----|--|-------------------|----------|---------------|-------------------------------|--------|-------------|---------------|------------------------------|-----------------------------------|---------------------|---------------|
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | |

Signature: DIA COE – DIA COE Institute
 Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Form 5J: Cost Estimation for Contingency (Post GC)

Cost Estimation for Contingency

(Add more rows at the end if required)

| Year | Description | Amount |
|---------------|--------------------|---------------|
| Year-1 | | |
| Year-2 | | |
| Year-3 | | |
| Year-4 | | |

Form 5K: Cost Estimation for Travel (Post GC)

Cost Estimation for Travel

(Add more rows at the end if required)

| Year | Domestic travel details like places of visit, No. of visits/year | Amount |
|---------------|---|---------------|
| Year-1 | | |
| Year-2 | | |
| Year-3 | | |
| Year-4 | | |

Signature: DIA COE – DIA COE Institute
Name

Signature: Prof Principal Investigator Name

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Note: Proposal, to be revised based on recommendation of TEC/ RAB/ GC

Form 6A: PI/Co PI/ NRI Co PI Details

| | | |
|-----------------------------|--------------------------------|------------------------------------|
| <input type="checkbox"/> PI | <input type="checkbox"/> Co PI | <input type="checkbox"/> NRI Co PI |
|-----------------------------|--------------------------------|------------------------------------|

| | | |
|-----|-------------------------|---|
| 1. | Name | Prof Principal Investigator Name |
| 2. | Designation | |
| 3. | Department | |
| 4. | Institution | Institute Name |
| 5. | Birth Date (dd/mm/yyyy) | |
| 6. | Gender (Dropdown) | Choose an item. |
| 7. | Email | abc@iitx.ac.in |
| 8. | Phone | +91 9999999999 |
| 9. | Fax | +91 XXXXXXXXXX |
| 10. | Mobile | +91 MMMMMMMMMM |
| 11. | Address | Department Name, Street Name and other address City, State and Pin Code |
| 12. | Country | |

13. Academic Qualification (Begin with Bachelor Degree)

| <i>Degree</i> | <i>University</i> | <i>Subject</i> | <i>Year</i> |
|----------------------|-------------------|----------------|-------------|
| <i>Bachelor</i> | | | |
| <i>Master's</i> | | | |
| <i>PhD</i> | | | |
| <i>Post Doctoral</i> | | | |

Signature: DIA COE – DIA COE Institute
 Name

Signature: Prof Principal Investigator Name

Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

14. Other Research Training & Experience (*Especially establishing research qualification in area covered by this application including previous and present two highlights*)
 (Add more rows at the end if required)

| Institution | Topic of work done | Year |
|--------------------|---------------------------|-------------|
| | | |
| | | |

15. Field of major scientific interest

15.1. Area 1

15.2. Area 2

15.3. Area 3

16. Best 2 Publications with impact factor

16.1. Paper 1; reference with Impact Factor

16.2. Paper 2; reference with Impact Factor

17. Details of Patents

17.1. Patent 1

17.2. Patent 2

18. Details of technologies developed in the field

18.1. Technology 1

18.2. Technology 2

18.3. Technology 3

19. List of ongoing projects of PIs

(Add more rows at the end if required)

| Funding agency | Amount (Rs) | Start Date | End Date | Title | PI | Co-PI |
|-----------------------|--------------------|-------------------|-----------------|--------------|-----------|--------------|
| | | | | | | |

20. List of projects conducted for DRDO/DIA-CoE/ other Govt agencies/ CSIR/ DST/ DBT/ PSA office etc.

(Add more rows at the end if required)

| S.No | Project Title | Department | Report / UC submitted or pending |
|-------------|----------------------|-------------------|---|
| 1 | | | |

Signature: DIA COE – DIA COE Institute
 Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

Form 6B: Industry/Startup Co-PI Details

| | | |
|-----|---------------------------------------|-----------------|
| 1. | Name of Industry | |
| 2. | Branch | |
| 3. | Date of Incorporation (dd/mm/yyyy) | |
| 4. | PoC of Industry | |
| 5. | Designation | |
| 6. | Gender (Dropdown) | Choose an item. |
| 7. | Email (PoC and Industry) | |
| 8. | Phone | |
| 9. | Fax | |
| 10. | Mobile | |
| 11. | Address | |

12. Research, Training & Experience (*Especially establishing research qualification in area covered by this application including previous and present two highlights*)
 (Add more rows at the end if required)

| Institution | Topic of work done | Year |
|-------------|--------------------|------|
| | | |
| | | |

13. Participation of Industry in R&D with other organisations

13.1. Participation 1

13.2. Participation 2

13.3. Participation 3

Signature: DIA COE – DIA COE Institute
 Name

Signature: Prof Principal Investigator Name

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Note: Proposal to be revised based on recommendation of TEC/ RAB/ GC

14. Details of Patents

14.1. Patent 1

14.2. Patent 2

15. Details of technologies developed in the field

15.1. Technology 1

15.2. Technology 2

16. List of projects conducted for DRDO/DIA-CoE/ other Govt agencies/ CSIR/ DST/ DBT/ PSA office etc. Project completed for other/host countries can be listed in the given technical field.

(Add more rows at the end if required)

| S.No | Project Title | Department |
|------|---------------|------------|
| 1 | | |
| 2 | | |

Form 7A: Certificate of Project Submission

The undersigned agree to abide by the terms and conditions set forth for the Directed Research Grant and certify that basic necessary facilities for the proposed work are available and the same can be extended to the investigator. The proposal has not been submitted to or under consideration by any other funding agency, simultaneously. As on date statement of accounts / Utilization Certificate of completed DRDO projects and technical closure reports are not pending with PI / Institute.

**Administrative authority of host
institution forwarding proposal**

**Principal Investigator (PI) Institute
Name**

Signature with Seal

Signature with Seal

Name:

Name: Prof Principal Investigator Name

Designation:

Designation:

Date:

Date:

Official Stamp
University/Institution

Form 7B: Cost Reasonability Certificate

The rates as quoted in the budgetary quotation provided by the vendors for equipment, Expendables and procured services are reasonable.

**Principal Investigator (PI) Institute
Name**

Signature with Seal

Name: Prof Principal Investigator Name

Designation:

Date:

Form 7C: HRA Certificate

It is certified that the HRA claimed for the research staff from DRDO shall be paid if no accommodation is provided to them.

**Administrative authority of host
institution forwarding proposal**

**Principal Investigator (PI) Institute
Name**

Signature with Seal

Signature with Seal

Name:

Name: Prof Principal Investigator Name

Designation:

Designation:

Date:

Date:

Form 7D: Certificate of Commercial Use

The institution shall maintain an account of its incomes arising out of commercial use and any royalty income shall be shared equally between DRDO and grantee institution.

Administrative authority of host institution forwarding proposal

Principal Investigator (PI) Institute Name

Signature with Seal

Signature with Seal

Name:

Name: Prof Principal Investigator Name

Designation:

Designation:

Date:

Date:

Form 7E: Ethical Practices Project Certificate

(Clearance certificates to be obtained for the concerned authorities as applicable to the project)

It is certified that (a)Institutional ethical clearance and project approval (b)Clearance from the nuclear medicine committee of BARC and (c)Clearance from Institutional Bio safety committee have been obtained and relevant document are attached”.

**Administrative authority of host
institution forwarding proposal**

**Principal Investigator (PI) Institute
Name**

Signature with Seal

Signature with Seal

Name:

Name: Prof Principal Investigator Name

Designation:

Designation:

Date:

Date:

(Projects involving DNA/genetic engineering work should be examined and certified by the Institutional Bio-Safety committee (IBSC), Lodhi Road, Delhi.)

End of Proposal

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