

Ref No
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Date
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**INDIAN INSTITUTE OF SPACE SCIENCE AND TECHNOLOGY (IIST)**  
**THIRUVANANTHAPURAM**

**FORMATS FOR SUBMISSION OF RESEARCH PROJECTS (To be filled by  
applicant)**

1. Project Title:

2. Broad Subject:

3. Sub Area:

4. Duration in months:

5. Name of Principal Investigator:

6. Designation :

7. Department :

8. Name of Co-Investigator: -

9. Designation:

10. Department:

11. Key words (maximum 6):

12. Technical details:

**13. Introduction :**

a) Origin of the proposal

b) Definition of the problem

c) Objectives

**14. Review of status of Research and Development in the subject  
(including references):**

a) International status

b) National status

- c) Importance of the proposed project in the context of current status
- d) Review of expertise available with proposed investigating group in the subject of the project
- e) Relevance of the project to ISRO activities
- f) Expected outcome and Deliverables

**15. Work plan:**

- a) Methodology
- b) Organisation of work elements
- c) Time schedule of activities giving milestones

**16. Budget estimates:**

	Item	BUDGET			(in Rupees)
		I year	II year	III year	
<b>A</b>	<b>Recurring</b>				
	1. Salaries/Wages				
	2. Consumables/Chemicals				
	3. Contingencies				
	4. Testing Charges				
<b>B</b>	<b>Equipment</b>				
	1.				
	2.				
	<b>Total (A+B)</b>				

**17. Justification for the proposed equipment:**

**18. Any other relevant matter:**

**19. Provide names and complete addresses including e-mails of minimum of six experts working in the same or relevant research area. (Attach as separate sheet).**

**20. Provide the details of the current & past IIST / R&D Projects (including title of the project, duration, budget allotted, outcome of the project etc)**

**21. Whether detailed Bio-data of the Investigator/Co-Investigator(s) is enclosed?**

**22. Declaration**

I/we agree to abide by the rules and regulations of IIST research grants and accept to be governed by all terms and conditions laid down for the purpose.

I/We further certify that I/we have not received any grant –in-aid for the same purpose from any other department of the central Government/State Government /public sector enterprise during the period to which the grant relates.

Principal Investigator  
Investigator

(Signature/Date)

(Signature/Date)

Co-Investigator

(Signature/Date)

Co-

**24. Recommendation of the Head of Department**

SIGNATURE OF THE HEAD OF DEPARTMENT (Seal)