

**Rajarshi Shahu Mahavidyalaya (Autonomous), Latur**

**Seed Money Proposal**  
(Research Motivation Scheme)

1. Broad Subject Domain:

2. Area of Specialization:

3. Principal Investigator:

(i) Name:

(ii) Date of Birth:

(iii) Qualification:

(iv) Designation:

(v) Address:

Office:

Residence:

Phone No:

Mobile No:

Email Id:

(a) Teaching Experience of Principal Investigator:

UG:

PG:

(b) Research Experience of Principal Investigator:

(c) In case the Teacher holds a Doctoral degree:

(i.) Title of the Thesis:

(ii.) Year of the Award of Degree:

(iii.) Name of the University:

(d) Publication, if any (Give Numbers Only)

- Research Papers:
- Books:
- Patent obtained, if any

(Please Enclose the Hard Copy of a Latest Full Length Paper)

4. Name of the Department where the Project will be undertaken:

5. (A) Proposed R& D Project Title:

(i) Introduction:

(ii) Significance of the Study (500 Words)

(iii) Objective:

(iv) Methodology & Plan of Work:

(B) Financial Assistance Required (Budget):

Item Estimated Expenditure

(i) Consumable & Chemicals:

(ii) Equipment, if needed (please specify name & approx cost)

(iii) Contingency & local travel:

6. Available equipment and accessories to be utilized for the project.

7. Any other information which is helpful in evaluating the project.

Signature of Principal Investigator

Signature of Principal

### **To Certify that**

- (a) General physical facilities, such as furniture/ space etc. are available in the Department/ College.
- (b) I/we shall abide by the rules governing the scheme in case assistance is provided to me/us from the Rajarshi Shahu Mahavidyalaya (Autonomous), Latur, for the above project.
- (c) I/we shall complete the project within the stipulated period. If I fail to do so and if the Rajarshi Shahu Mahavidyalaya (Autonomous), Latur, for the above project is not satisfied with the progress of the research project, the College may terminate the project immediately and ask for the refund of the amount received.
- (d) The above research project is not funded by any other agency.

Signature of Principal Investigator

Head of Department

## **Endorsement:**

Project title: \_\_\_\_\_

Herein, certified that, the department welcomes participation of Shri. /Smt. \_\_\_\_\_ as the investigator for the project.

Certified that the equipment and other basic facilities in the application and such other administrative facilities as per terms and conditions of the grant will be extended to the investigator (s) throughout the duration of the project.

The department assumes to undertake the financial and other management responsibilities of the project. The Department assumes the responsibilities of submitting Grant Utilization Certificate Project report and project completion report to the college not later than 31<sup>st</sup> March of the next financial year or the date prescribed by the college.

Place:

Date:

**Head of the Department**

**Rajarshi Shahu Mahavidyalaya (Autonomous), Latur**

**Utilization Certificate**

Certified that the grant of Rs. \_\_\_\_\_ (Rupees \_\_\_\_\_  
\_\_\_\_\_ only) received from Rajarshi Shahu Mahavidyalaya (Autonomous), Latur, under the  
scheme of support for Seed Money Project entitled \_\_\_\_\_  
vide college letter No. \_\_\_\_\_ dated \_\_\_\_\_ has been fully utilized for the purpose for  
which it was sanctioned and in accordance with the terms and conditions laid down by the college.

Signature of Principal Investigator

Signature of Principal

Chartered Accountant/Auditor

**Rajarshi Shahu Mahavidyalaya (Autonomous), Latur**  
**Acceptance Certificate for Seed Money Project by Principal Investigator**

**Name** \_\_\_\_\_

**Letter No.** \_\_\_\_\_ **Dated** \_\_\_\_\_

**Title of the Project** \_\_\_\_\_

1. The research project is currently not supported by any other funding agency.
2. The terms and conditions related to the grant are acceptable to the Principal Investigator and department with utilization of allotted grant.
3. At present, I have no research project approved by college and the accounts for the previous project, if any have been settled.
4. The date of implementation of the project is \_\_\_\_\_

**Date:**

Signature of Principal Investigator

Head of Department

## **Rajarshi Shahu Mahavidyalaya (Autonomous), Latur**

**Proforma for Submission of Information of Final Report of the Work Done on the project  
(To be submitted within two months after completion of project period)**

1. Name and Address of the Principal Investigator:
2. Name and Address of the Institution /Department:
3. Tenure of the Project .....
4. Title of the Project .....
5. Total Grant Sanctioned .....
7. Total Grant Received .....
8. Final Expenditure .....
9. Objectives of the Project .....
10. Whether Objectives were Achieved .....
- (Brief details)
11. Summary of the Findings/Ppublications/Patents.....
- (In 500 words )
12. Future Scope .....
- (Give details)

**Principal Investigator**

**Principal**