

PARUL UNIVERSITY

APPLICATION FORM FOR CONTINGENCY GRANT

Instalment No. -I/II/III:

1. Name of the Ph.D. Scholar:
2. Enrolment Number:
3. Type of Ph.D. Programme (Full time/Part-time):
4. Name of the Faculty:
5. Discipline / Specialization:
6. Contact details of Ph.D. Scholar:

[M]: _____ E-Mail: _____

7. Name of the Research Supervisor:
 8. Designation and Institute of Research Supervisor:
 9. Contact details of Research Supervisor:
- [M]: _____ E-Mail: _____
10. Name of the Research Co-Supervisor (if any):
 11. Designation and Institute of Research Co-Supervisor (if any):

12. Project Details:

1	Title of the Project	
2	Duration of the Project:	
3	Actual expenses incurred:	

13. Bank Details of PhD Scholar:

Account Name	
Account Number	
Bank Name	
Bank Branch	
City	
IFSC code	

14. Whether Intra-mural Research Grant received by the Ph.D. Scholar and/or Research Supervisor? (Yes/No) _____

If yes, write the title and amount of the Research Project Sanctioned

15. Any Grant from Government/non-government funded project received? (Yes/No):

_____.

If yes, write the title and amount of the Research Grant Sanctioned

16. EXPENDITURE DETAILS

A. Recurring Expenses

- a. Chemicals, Biologicals, Animals etc.
- b. Analytical Charges
- c. Any other consumables

Sr. No.	Particulars	Name of Supplier/Organization	Invoice No.	Date	Amount (In Rupees)
1					
2					
3					
	Total (A)				

B. Non-recurring Expenses

Sr. No.	Equipment	Make / Model Number	Invoice No.	Date	Amount (In Rupees)
1					
2					
3					
	Total (B)				

C. Miscellaneous

Sr. No.	Particulars	Invoice No./Cash Memo	Date	Amount (In Rupees)
1				
2				
3				
	Total(C)			

Total Expenditure of A + B + C (Rs.):

Total Expenditure Amount in words:

I, _____ declare that, all the particulars mentioned above are true and correct to the best of my knowledge and belief. In the event of any information provided by me being found wrong/misleading, my application shall stand cancelled. I also understand that the decision of the University shall be final and binding, and I shall fully abide by it.

Date:

Place:

Signature of the Ph.D. Scholars

Enclosures:

- Proof of Bank Details of Ph.D. Scholar
- Proof of Intra-mural Research Grant received
- Proof of Government/non-government funded project
- Original bills of all expenditure (Duly signed by the Ph.D. Scholar and Research Supervisor) incurred in particular Financial Year

RECOMMENDATION

	Name of Concerned Person	Recommendation (Yes / No)	Signature
Research Supervisor			
Dean of respective Faculty			
Director, RDC			

Dean, DSR			
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SANCTION

	Remarks	Sanctioned (Yes / No)	Signature
CHAIRPERSON, RDC			