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| **SENATE RESEARCH COMMITTEE SHORT-TERM (ST) GRANTS** | ICITR International Conference 2020 |
| GRANT APPLICATION | YEAR 2022 |
| UNIVERSITY OF MORATUWA |

**SECTION 01.**

1. **Proposal Summary**
	1. Title of the project:

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Abbreviated (running) title in not more than six words:

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Key words (from broad to specific):

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Duration (not more than six months. State in months):

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Planned starting date in 2022 (Major equipment purchases are recommended to complete by October 2022).

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Grant type (research project only / research project with research students):

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Number of PhD, MPhil or MSc projects, if any, to be funded by the proposed grant:

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

* 1. Principal Investigator (PI)[[1]](#footnote-1):
		1. Name: ………………………………………………………………………………………………………..
		2. Employee Code: ………………………………………………………………………………………….
		3. Contact details

|  |  |  |  |
| --- | --- | --- | --- |
| Home tel. no. | Office tel. no. | Mobile phone no. | Email |
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* + 1. Department and present position or designation:

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Highest academic qualification and year obtained:

………………………………………………………………………………………………

* + 1. Field of specialization:

………………………………………………………………………………………………

* 1. Names of co-investigator(s) (if any): Please fill Supplementary Form A for each co-investigator.

………………………………………………………………………………….............,.

A .10. Give the details of the ongoing SRC grants (which are not officially closed).

 A.10.1 Grant No: …………………………………………………………………………………

 A.10.2 Grant Title: ……………………………………………………………………………….

 A.10.3 Name of PI: ………………………………………………………………………………

 A.10.4 Year of Award: …………………………………………………………………………..

A.10.5 Current Status of the Grant: …………………………………………………………….

 A.10.6 Estimated date for closing the Grant: ………………………………………………….

**Supplementary Form A**

**To be filled separately by each co-investigator**.

1. Name: Underline surname; give title, if any.

……………………………………………………………………………………………………….…………………………………………………………………………………………………….…

1. Contact details

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| --- | --- | --- |
| Home tel. no. | Office tel. no. | Mobile phone no. |
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|  |
| E mail |  |

1. Institution, department, and present position or designation:

……………………………………………………………………………………………………….………………………………………………………………………………………………….……

1. Highest academic qualification and year obtained:

……………………………………………………………………………………………………….…………………………………………………………………………………………….…………

1. Field of specialization

……………………………………………………………………………………………………….…………………………………………………….…………………………………………………

1. List 10 key publications in refereed journals you have authored during the last 10 years

……………………………………………………………………………………………………….…………………………………………………….…………………………………………………

……………………………………………………………………………………………………….…………………………………………………….…………………………………………………

…………………………………………………………

Signature of the Co-Investigator

Date: ………………………………………………….

1. **Financial Information**

**Requests for amounts exceeding those in Table 1** **will generally not be entertained due to a limited total budget**

* 1. Summary of financial support requested: In Sri Lankan Rupees, inclusive of all taxes.

Table 1: Budget

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **2022** | **2023** | **Total** |
|  | Consumables  |  |  |  |
|  | Local travel |  |  |  |
|  | Stipend |  |  |  |
|  | Publications |  |  |  |
|  | Other |  |  |  |
| * + 1.
 | **TOTAL** |  |  |  |

* 1. Consumables

List and price all breakables and consumables

* 1. Local travel

List and justify travelling plan and expenses(see instructions).

* 1. Stipend

Calculate total stipend requirement for research personnel, based on envisaged durations. Research scholar, research assistant, or technical assistant inputs should generally not exceed 36 calendar months per person.

* 1. Publications

See instruction for details and amounts.

* 1. Other

Any other related expenses should be included here.

1. **Administrative Information**
	1. Has this or a similar proposal for financial support authored by the principal investigator or co-investigators been accepted by or submitted any other funding agency, national or foreign? If so, give the following details:
		1. Name(s) of investigator(s):

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Full title of project:

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Whether only submitted or already accepted:

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Duration (include start and finish dates):

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Financial support:

……………………………………………………………………………………………………….………………………………………………………………………………………

* + 1. Funding agency:

……………………………………………………………………………………………………….………………………………………………………………………………………

* 1. Declaration by the applicant (i.e., the Principal Investigator):

……………………………………………………………………………………………………….……………………………………………………………………………………………………….

I hereby declare that all information provided is accurate to the best of my knowledge.

Signature of Principal Investigator and date: ………………………………………………………………..

* 1. Declaration of the Head of Department **(Head of the Department will provide the Declaration through the LMS-based application submission system. Applicants can ignore this)**

I hereby assure that the Principal Investigator of the present proposal will be assured of infrastructural support in human and material resources enjoyed at the inception of the project and guaranteed to be sustained for the whole duration of the latter.

The level of support that will be committed to this project will be very high /significant /adequate ***(choose one).***

* 1. Recommendation of Dean **(Dean will provide the recommendation through the LMS-based application submission system. Applicants can ignore this)**

This project is recommended/not recommended for consideration for funding ***(choose one)***

Reasons (if any):

1. Refers to a permanent academic staff at or above Lecturer (Transitionary); This does NOT refer to research student(s): [↑](#footnote-ref-1)