

Office of Research Innovation and Commercialization (ORIC)

Rawalpindi Medical University

For Official Use Only:

Date:

FUNDING APPLICATION FORM FOR RESEARCHERS

Reference no.

1. RESEARCH PROPOSAL/PROJECT INFORMATION

Title of the Research Proposal Research Area Duration Proposed Budget Proposed Stat Date Co-Principal Investigator Name: Email: Graduate Program that the proposal aligns with Proposal aligns with Executive Summary of the project, (Max. 500 words) Research/Academic Objectives		Proposal Details	
Research Area Image: Comparison of the project, (Max. 500 words) Research/Academic Image: Comparison of the project, (Max. 500 words)	Title of the Research Proposal		
Proposed Budget Image: Composed Start Date Co-Principal Investigator Name: Email: Graduate Program that the proposal aligns with Image: Composed Start Date Executive Summary of the project, (Max. 500 words) Image: Composed Start Date Research/Academic Image: Composed Start Date			
Proposed Start Date Name: Email: Co-Principal Investigator Name: Email: Graduate Program that the proposal aligns with Image: Proposal aligns with Executive Summary of the project, (Max. 500 words) Image: Project, (Max. 500 words) Research/Academic Image: Proposal aligns with	Duration		
Co-Principal Investigator Name: Email: Graduate Program that the proposal aligns with Executive Summary of the project, (Max. 500 words)	Proposed Budget		
Graduate Program that the proposal aligns with Executive Summary of the project, (Max. 500 words) Research/Academic	Proposed Start Date		
Executive Summary of the project, (Max. 500 words)	Co-Principal Investigator	Name: Emai	l:
project, (Max. 500 words) Research/Academic	Graduate Program that the proposal aligns with		
Research/Academic Objectives	Executive Summary of the project, (Max. 500 words)		
	Research/Academic Objectives		

Problem Statement:	
 Measurable outcomes of project (Specify all measurable o collaborations established): 	utcomes of the project, such as journal papers, grants,
 Milestones of the project (Provide quarterly deliverables w 	ith dates):
2. DETAILS OF RES	
2. DETAILS OF RES 2-1. Name of The Researcher:	DEARCHER
2-2. Designation:	
2-3. Department	2-4. Employee Code
2-5. Cell	2-6. Email:

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3. BUDGET ESTIMATION

3-1. ESTIMATED BUDGET FOR THE PROPOSED RESEARCH PERIOD

(Please submit Excel sheet separately)

Sr#	Items	Description of Activities	Duration	Amount Requested
1	Senior Personnel (Names)			
2	Other Personnel (Names)			
3	Conferences/workshops			
4	Travel			
5	Consultant Fee			
6	Printing			
7	Dissemination Costs			
	Total Costs			

*Rows can be added under respective categories to further specify the items.

**Categorization of Direct and Indirect Costs can be specified according to Memorandum of Understanding (MOU)*

3-2. Equipment/Machines/Apparatus etc.

This may include necessary Chemicals, Glassware, Consumables, Accessories, Lab equipment, Machines and Apparatus to carry out the applied research. The applicant will have to justify the procurement of equipment and apparatus in the context of his/her research proposal/project

S #	Items	Justification	Amount (Rs
1			
2			
3			
4			
	Total Cos	st	
	Grand Total Project Cost		

4. PARTNER INDUSTRY (if any)

4-1. Name and Address:

4-2. C	ontact:
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4-3. Email:

Undertaking and Endorsement

I hereby solemnly declared that:

- 1- I am not defaulters of any HEC scholarship Program (foreign and indigenous) or any other.
- 2- All the information provided above is true to the best of my knowledge and belief.
- **3-** If the grant is provided, I shall solely be responsible for its proper utilization.
- 4- All the supporting documents submitted are authenticated.

Researcher Signature

Verified By	Approved By
Director (ORIC)	Vice Chancellor (RMU) Name:
Name: Signature:	Signature:

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Rawalpindi Medical University

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IMPORTANT NOTES

- 1- Project must solve some current problem, improve economics or add value in social life.
- 2- Project's Term of Reference (TOR) needs to be clear in terms of role, payments, time and deliverables.
- **3-** RMU-ORIC will work for commercialization/patent filing of these projects.
- 4- Researcher will be credited as inventor of technology and get share from financial proceeds if any asper RMU-ORIC policy.
- 5- Project technology will be property of RMU.
- 6- Ensure to attach detailed list (with quantity and cost of each item) (in original) for Lab Chemicals/Glassware/Consumables/Accessories etc.
- 7- University evaluation will be mandatory in case any dispute arises between researcher and RMU.

Application Submission Checklist

Please check the appropriate option

1	Objective & Scope of Project is clearly defined	YES	NO
2	Project has commercial potential	YES	NO
3	Project deliverables are agreed upon industry (If Industry Partner)	YES	NO
4	Application must be routed through respective Dean's office to ORICs office	YES	NO
5	Copy of CNIC & Passport size photograph of Principle Investigator	YES	NO
6	Industrial support letter from partner industry with their NTN/STN	YES	NO
7	Personnel cell number and official email	YES	NO
8	CV of PI and of Co PI (if any)	YES	NO

9	CV of Industrial Partner	YES	NO
10	Quotations of the equipment & supplies (if needed)	YES	NO
11	Budget should also be submitted on excel sheet sent with soft copy	YES	NO
12	Application package must have world file, PDF, Budget & Information sheet (Excel)	YES	NO
13	hard copies with proper tape binding (no spiral binding will be accepted)	YES	NO
14	Soft copy must be in one application file (Word & PDF) & emailed to Manager.oric@rmur.edu.pk	YES	NO
15	Authentication from Vice Chancellor's office	YES	NO
16	Both hard and soft copy must reach well before the deadline	YES	NO