LIST OF ANNEXURES

ANNEXURE -I

COVER LETTER

To

The Member Secretary
Intra- Mural Research Grant (IMRG) Committee
University of Health Sciences (UHS)
Rohtak

Subject: Application for intramural grant under…….scheme

Please find enclosed the research project entitled "…" for intramural research grant under …….scheme along with the required enclosures.

This is for your kind information and necessary action please.

Yours sincerely,

Signature of applicant
Name
Designation
Department
Name of institution
E-mail id:
Mobile no.:

ANNEXURE-II

APPLICATION FOR INTRAMURAL RESEARCH GRANT (IMRG)

A. BASIC INFORMATION

1. Type of scheme applying for:

- ☐ Faculty Intramural Research Grant (FIRG) scheme
- ☐ Post Graduate Dissertation Support (PGDS) Scheme
- ☐ University Undergraduate Research Scheme (UURS)

2. Details of Principal Investigator

Name:

Designation:

Department:

Name of the institution:

Date of birth: Age (years):

Gender:

Mobile no.: Any alternative mobile no.:

Official e-mail id: abcd@uhsr.ac.in Alternative/personal e-mail id: abcd@gmail.com

ORCID id:

GCP certification: YES/NO If Yes, please attach proof

Any running project as PI under intramural grant scheme: Yes/ No

If YES,

- Type of scheme:
- Title of the project:
- Status: Ongoing/ completed

3. **Details of Co-Investigator/ Undergraduate student/ Postgraduate student/ Fellow***(Please tick appropriately)*

Name:

Designation:

Department:

Age (years):

Gender:

Mobile no.:

Official e-mail id: Alternative/ personal email id:

ORCID id:

GCP certification: YES/NO If Yes, please attach proof

B. PROJECT REALTED INFORMATION

1. **Title of the project:**

2. **Type of study:**

☐ Basic Sciences ☐ Socio-behavioral

☐ Prospective ☐ Public health

☐ Retrospective ☐ Epidemiological

☐ Observational ☐ Biological samples/ data

☐ Interventional ☐ Cross-sectional

☐ Clinical trial ☐ Any others, specify

3. **Site of study:** Single centre/ multi-centric

4. **Names of collaborating sites for multi-centric study:**

5. **Duration of project:**

6. **Registration with Clinical trial registry of India (CTRI): YES/ NO**

7. **CTRI registration number:**
8. **Approvals obtained**

Scientific advisory Committee: YES/NO Date of approval:

PG Board of studies: YES/NO Date of approval:

Institute Ethics Committee: YES/ NO Date of approval:

IEC approval of other collaborating centres, if applicable: YES/ NO

Date of approval:

Any other regulatory approvals obtained, please specify:

9. **Total estimated budget:**

ANNEXURE-III

FORMAT OF RESEARCH PLAN

Title of the proposed research project: should beconcise, sufficiently descriptive and informative. Title may include study design such as randomized controlled trial; an observational study; a case-control study etc.

Summary (up to 200 words): A structured summary should contain the following subheadings: Background, rationale, Objectives, Methods, and Expected outcome.

Budget proposal with break-up.

The budget should be allocated as below mentioned broad sub-heads:

S.No.	Particulars/ Budget	Year 1	Year 2	Total	Justification
1.	Equipment				
2.	Contingency- Recurring				
3.	Contingency-Non-recurring				
4.	Others (if any)				
	Sub-total yearwise				

In case of multi-centric projects, budget allocated to all the participating sites should be mentioned separately.

List of abbreviations

Introduction and brief review (up to 1000 words):

- What is known about the topic (state the background information to adequately present the problem citing previous relevant research);
- What are the existing gaps in knowledge (problems with previous research and uncertainities);
- What is the relevance of the research question (mention how the research question addresses the critical barrier(s) in scientific knowledge);
- What is the justification of research (how the findings of the proposed study will provide solution to uncertan issues, generate new information and influence practice guidleines or public health policy).

Research question and hypothesis: to be clearly mentioned

Aim and objectives: Define the objectives clearly and in measurable terms; mention as primary and secondary objectives if necessary (Avoid too many objectives).

Methodology: include the following sub-heads:

- *Study design and settings:* details of study design whether descriptive, analytical, experimental, operational, a combination of these or any other; settings where the study will be conducted.
- *Study population:* adequate description of study population including eligibility criteria.
- *Study conduct:* detailed description of how the subjects will be recruited, allocation to study arms, follow up, study related procedures etc. A flow chart indicating the study paln may be provided.
- *Intervention:* a detailed description of Intervention (drug/device/behavioral intervention/ any other).
- *Sample size calculation:* Details of sample size and/or power calculation should be described with references where needed.

Data collection and statistical anlaysis plan.

Ethical justification of the study.

Expected outcomes (up to 100 words).

Future plans based on expected outcomes (if any) (up to 100 words).

Timelines (Gantt chart): Details of activities to be carried out along with timelines during preparatory phase, data collection, analysis & report writing to be provided.

ANNEXURE- IV

DECLARATION BY THE INVESTIGATORS

Please tick as applicable

I/We certify that the information provided in this application is complete and correct.	
I/We confirm that all investigators have approved the submitted version of proposal/related documents.	
I/We confirm that this study will be conducted in accordance with the Drugs and Cosmetics Act 1940 and its Rules 1945 as amended from time to time, New drugs and Clinical Trial Rules 2019 GCP guidelines and other applicable regulations and guidelines.	
I/We confirm that this study will be conducted in accordance with the latest ICMR National Ethical Guidelines for Biomedical and Health Research Involving Human Participants and other applicable regulations and guidelines.	
I/We hereby declare that the funds received will be utilised as per the proposed budget and any re-appropriation of funds, if needed, will be made after due approval from IMRG committee.	
I/We agree to send an official acknowledgment of receipt of funds to Professor incharge research via E-Mail as soon as funds have been credited to the Recipient's bank account, no later than two weeks after transaction.	
I/We agree to submit the regular reports, utilization certificate (UC) and statement of expenditure (SOE) as per the timelines to IMRG committee.	
I/We hereby declare that expenditure shall on no account exceed the budget sanctioned for the project.	
I/We declare/confirm that all necessary approvals will be obtained as per requirements wherever applicable.	

Name of PI:

Signature of PI with date:

Name of Co-investigtaor:

Signature of Co-investigator with date:

ANNEXURE- V

CHECKLIST

S. No.	Items	Yes	No	Encl. no.	IMRG committee remarks*(For office use only)*
1.	Annexure- I: Cover letter				
2.	Brief CV of all investigators				
3.	Good Clinical Practice (GCP) training certificate of investigators				
4.	Approval of Scientific advisory committee/ PG board of studies				
5.	Approval of Ethics Committee of the PI's institute				
6.	IEC approval from other collaborating centres, if applicable				
7.	CTRI registration				
8.	Any other regulatory approvals, if applicable				
9.	Annexure-II: Application form for Intramural research grant (IMRG)				
10.	Annexure-III: Detailed research plan including summary & budget break up				
11.	Participant information sheet and informed consent form, if applicable				
12.	Annexure IV: Declaration by investigators				

ANNEXURE-VI

FORMAT FOR PROGRESS REPORT

1. Project title
2. PI (name & address)
3. Co-PI (name & address)
4. Date of start
5. Duration
6. Objectives of the proposal
7. Methodology
8. Interim modification of objectives/methodology (with justifications)
9. Detail progress of the work carried out during the period
10. A summary sheet of not more than two pages under following heads (Title, Introduction, Rationale, Objectives, Methodology, Results)
11. Research work which remains to be done under the project
12. Any publications.
13. Any presentation/s in regional/ national/ international forums.
14. Any patents applied for

Date:

Signature of PI:
Designation

ANNEXURE-VII

STATEMENT OF EXPENDITURE

1. Sanction Letter/ Order No. and date of sanctioning the project:
2. Total Project Cost (sanctioned):
3. Date of Commencement of Project:
4. Date of completion of Project:
5. Grant received in each year: (financial year):
    a. 1st Year :
    b. 2nd Year:
    c. Interest, if any:
    d. Total (a+b+c):

Statement of Expenditure

(To be submitted financial yearwise i.e. DOS* to next 31st March; 01.04.20xx till 31st March 20xx+1 year)

S. No.	Sanctioned heads	Funds allocated	Expenditure incurred		Total (I +II)	Balance, if any	Requirement of funds for next year
			1st year (DOS* to next 31st March) (I)	2nd year (01.04.20xx till 31st March 20xx+1 year) (II)			
1.							
2.							
3.							
…							
	Total						

*Date of start of project

Amount to be refunded/ reimbursed (whichever is appropriate): Rs.

Name and Signature of Principal Investigator — Signature of competent financial/ audit authority (with seal)

Date: — Date:

Note: *The expenditure under various sanctioned heads should be done as per the approval. Any additional expenditure shall not be entertained by the Committee without prior approval.*

ANNEXURE-VIII

UTILISATION CERTIFICATE

(for the financial year ending 31st March …….)

1. Title of the project/scheme :
2. Name of the Principal Investigator :
3. Name of PI's department:
4. Name of PI's Institute:
5. IMRG Project sanction order No. & date of sanctioning the project :
6. Amount brought forward from the previous financial year & date in which the authority to carry forward the said amount was given :
7. Amount utilised:
8. Unspent balance, if any:
9. Balance amount to be released:
10. Complete account details for RTGS/NEFT including PAN no. :

1. Certified that the amount of Rs. _____ has been utilised on the project / scheme for the purpose for which it was sanctioned and that the balance of Rs. ……..…….remain unutilized at the end of the year which will be adjusted towards the funds payable during the next year.

2. Certified that I have satisfied myself that the conditions on which the grant was sanctioned have been duly fulfilled / are being fulfilled and that I have checked that the money was actually utilised for the purpose for which it was sanctioned.

(Principal Investigator) **(Finance Officer)**

(Signed) **(Signed and stamped)**

(Head of the Department)

(Signed and stamped)

ANNEXURE-IX

FORMAT OF FINAL REPORT

1. Title of the Project:
2. Principal Investigator:
3. Co-Investigator(s):
4. Name of implementing Institution and other collaborating Institutions (if any):
5. Date of commencement
6. Duration
7. Date of completion
8. Objectives as approved
9. Deviation made from original objectives if any, while implementing the project and reasons thereof.
10. Field/ Experimental work giving full details of summary of methods adopted.
11. A summary sheet of not more than two pages under following heads (Title, Introduction, Rationale, Objectives, Methodology, Results, Translational-Potential)
12. Contributions made towards increasing the state of knowledge in the subject.
13. Conclusions summarizing the achievements and indication of scope for future work.
14. List of research publications with complete details: Authors, Title of paper, Name of Journal, Vol., page, year
15. Patents taken, if any:
16. Products developed, if any.

17. Procurement/usage of Equipment

a.

S.No.	Name of Equipment	Make/Model	Cost (INR)	Date of installation	Utilization rate%	Remarks regarding maintenance/ breakdown
1.						
2….						

b. Suggestions for disposal of equipment.

Name and signature with date

Principal Investigator:

Co-Investigator/s: