Dated, January 25, 2024

UNIVERSITY OF HEALTH SCIENCES ROHTAK RESEARCH & DEVELOPMENT CELL Call for proposals for Post Graduate Dissertation Support (PGDS) Scheme

Background

UHSR has launched a scheme of providing research grant to postgraduate students for thesis/ dissertation i.e. Post Graduate Dissertation Support (PGDS) scheme. Please bring to the notice of the postgraduates in your department to send their theses plan for grant as per format attached below. A copy of the thesis plan along with all the required documents as per the format may also be submitted through email at <u>researchcell@uhsr.ac.in</u>The last date of submission of proposals is 29th Feb 2024.

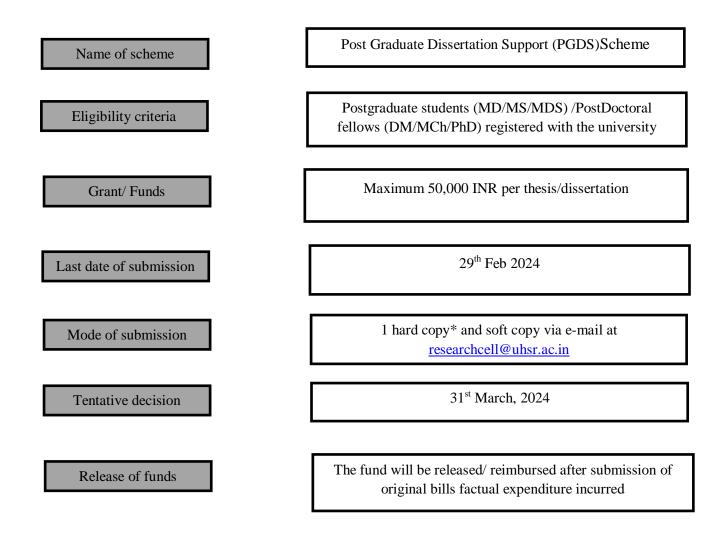
Guidelines for Post Graduate Dissertation Support (PGDS) Scheme

The application procedures and timelines for PGDS scheme are mentioned below.

- 1. The application for research grant (thesis plan along with all the required documents as per the format attached below) may be submitted by the postgraduate along with the cover letter duly signed by the PG student as Principal Investigator and Guide/supervisor and the co-guides/co-supervisors.
- 2. The application should be forwarded by Head of the Department.
- 3. The application can only be submitted after IEC approval has been obtained.
- 4. The thesis should not be submitted for extramural funding to any agency at the time of submission for intramural grant.
- 5. Postgraduates who have already completed their thesis are not eligible to apply for funding under this scheme.
- 6. Utilization of allocated funds
 - **6.2.** The amount sanctioned shall be utilized only for procurement of consumables that is chemicals, diagnostic kits and for data collection (in case of field studies), electrodes and minor accessories, repair/maintenance.
 - **6.3.** No hiring of person or undertaking of travel grant for attending conferences /workshop, printing of thesis/ photocopy/ binding etc will be permitted.
 - **6.4.** The PG Supervisor will follow the procedure for purchase of consumables as per the Purchase policy of the University/Government/Institute. The minor equipment thus procured through PGDS grant be entered in the stock register of the department.

Post Graduate Dissertation Support (PGDS) Scheme

Application procedures and tentative timelines



*Hard copy (documents to be attached at the time of submission):

- Cover letter (Annexure-I)
- Duly filled Application form for PGDS research grant (Annexure- II)
- Detailed thesis/ dissertation plan
- Declaration by the investigators (Annexure-III)
- Checklist (Annexure-IV)

All the above annexures are available at <u>uhsr.ac.in</u>

Hard copy may be submitted in the Research Cell, UHSR at the below mentioned address:

Prof. (Dr.) Kiran Dahiya Member Secretary Proposal evaluation and approval, IMRG University Research cell, Near PFT Lab, Block C, Old OPD building Pt. B D Sharma PGIMS, Rohtak.

Proposals to be sent via (Email): researchcell@uhsr.ac.in

ANNEXURE -I

Cover letter

То

The Member Secretary Research Cell University of Health Sciences (UHS) Rohtak

Subject: Application for research grant under "Post Graduate Dissertation Support (PGDS)" scheme

Please find enclosed the thesis/ dissertation entitled "…" for research grant under Post Graduate Dissertation Support (PGDS) scheme along with the required enclosures.

This is for your kind information and necessary action please.

Yours sincerely,

Signature of applicant (PG student/ Principal Investigator)

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

PG Supervisor and Co-Supervisor/s Signature Name Designation Department Institution

ANNEXURE-II

Application for Post Graduate Dissertation Support (PGDS) Scheme

A. BASIC INFORMATION

1. Type of scheme applying for:

Dest Graduate Dissertation Support (PGDS) Scheme

2. Details of Principal Investigator (PG student)

Name:	
Designation:	
Department:	
Name of the institution:	
Date of birth:	Age (years):
Gender:	
Mobile no.:	Any alternative mobile no.:
E-mail id:	

3. Details of Supervisor/ Co-Supervisors

Name:	
Designation:	
Department:	
Age (years):	
Gender:	
Mobile no.:	
Official e-mail id:	Alternative/ personal email id:

B. PROJECT REALTED INFORMATION

1. Title of the project:

2. Type of study:

Basic Sciences
Prospective
Public health
Retrospective
Epidemiological
Observational
Biological samples/ data
Interventional Cross-se onal
Clinical trial
Any others, specify

3. Duration of project:

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

5. CTRI registration number:

6. Approvals obtained

PG Board of studies: YES/NO	Date of approval:	
Institute Ethics Committee: YES/ NO	Date of approval:	

7. Total estimated budget:

8. Budget proposal with break-up. Justification for all the components of the budget projected in the proposal to be provided in detail.

ANNEXURE- III

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 office of Professor	
in-charge, Research cell, UHSR.	
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 office of Professor in-charge, Research cell, UHSR.	
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 (PG student):

Signature of PI with date:

Name of Supervisor/ Co-supervisors:

Signature of Supervisor/ Co-supervisors with date:

ANNEXURE- IV

CHECKLIST

S. No.	Items	Yes	No	Encl. no.	Research Cell remarks(For office use only)
1.	Annexure- I: Cover letter				
2.	Approval of Institute Ethics Committee				
3.	CTRI registration				
4.	Any other regulatory approvals, if applicable				
5.	Annexure-II: Application form for Post				
	Graduate Dissertation Support (PGDS)				
	scheme				
6.	Detailed thesis plan				
7.	Annexure III: Declaration by investigators				