Annexure 1

FACULTY PROJECT

COMPARATIVE STUDIES OF THE POTENTIAL OF SOME EDIBLE MUSHROOMS AS SOURCE OF BIOACTIVE COMPOUNDS AND NUTRACEUTICAL AGENTS

Project Plan

Submitted by **Ms. Manjali Sharma** Assistant Professor Department of Home Science

Submitted to



THE IIS UNIVERSITY, JAIPUR (2017-2018)



THE IIS UNIVERSITY, JAIPUR FORMAT FOR SUBMISSION OF PROPOSAL FOR MINOR RESEARCH PROJECT

PART -A

- 1. Broad Subject
- 2. Area of Specialization
- 3. Duration
- 4. Principal Investigator
 - i. Name:
 - ii. Sex:M/F
 - iii. Date of Birth:
 - iv. Qualification:
 - v. Designation:
 - vi. Residential Address

Telephone No. (O) _____

(R) ______ (M) _____

5. Co- Investigator(s):

(i) Name:

- (ii) Sex: M/F
- (iii) Date of Birth:
- (iv) Qualification:
- (v) Designation:
- (vi) Residential Address

Telephone No.	(0)
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(R) _____

(M) _____

- 6. Name of the Department where the project will be undertaken
- 7. Teaching and Research Experience of Principal Investigator:

(a) Teaching experience : UG _____years

PG _____Years

M.Phil. _____Years

(b) Research experience:

(c) Whether the project has been approved for the doctoral degree ? If so, please indicate :

- i. Date of Registration :
- ii. Name and designation of the supervisor approved by the University:
- iii. Name of the University Institute where registered :
- (d) In case the teacher holds a doctoral degree :

i. Title of the thesis :

ii Year of the award of degree:

iii. Name of the University :

(e) Publication:

Papers Published	Accepted :	Communicated

Books Published

Accepted :_____Communicated :

Please enclose the list of papers and books published and/or accepted during last five years

<u>PART -B</u>

Proposed Research Work

- 8. (i) Project Title :
- ii. Introduction
- Origin of the research problem

Interdisciplinary relevance

- Review of Research and Development in the Subject:
 - International status
 - National Status
- Significance of the study
- (iii) Objectives
- (iv) Methodology
- (v) Year-wise Plan of work and targets to be achieve,
- (vi) Details of collaboration, if any intended
 - 9. Financial Assistance required

	Item	Estimated Expenditure
1.	Books & Journals	
2.	Equipment, if needed	
3.	Field Work and Travel	
	(Please specify name & approx. cost)	
4.	Chemicals and Glassware	
5.	Contingency (including special needs)	
	Total :	

- 10. Whether the teacher has received support for the research project from any funding agency Major, Minor or any other scheme of support for research? If so, please indicate:
- (i) Name of the agency from which the assistance was approved
- ii. Sanction letter No. and date under which the assistance was approved
- ill. Amount approved and utilized
- iv. Title of the project for which assistance was approved

v. In case the project was completed, whether the work on the project has been published

vi. If the candidate was working for the doctoral degree, whether the thesis was submitted and accepted by the University for the award of degree.

(A summary of the report/thesis in about 1,000 words may please be attached with the application)

vii. If the project has not been completed, please state the reasons

, (c	. (a) Details of the project scheme completed of ongoing with the r.i								
Name of the agenc		Year	Tota	Equipment/Infrastructural facilities obtained					
	Started	Completed							

11	(a)	Details	of the	nroiect/	scheme	completed	or ond	oina v	vith the P.I
TT .	(a)	Details		projecy	SCHEITIC	completeu	U UIY	ung v	

(b) Institutional and Departmental facilities available for the proposed work: Èquipment:

Other Infrastructural facilities : 9. Any other information which the investigator may like to give in support of this proposal which may be helpful in evaluating.

To certify that:

- a. General physical facilities, such as furniture/space etc., are available in the Department/University.
- b. I/we shall abide by the rules governing the scheme in case assistance is provided to me/us from the University for the above project.
- d. I/we shall complete the project within the stipulated period. If I/We fail to do so and if the Universityis not satisfied with the progress of the research project, it may be terminated and immediately ask for the refund of the amount received by me/us.
- e. The above research Project is not funded by any other agency.

Name & Signature Principal Investigator Name & Signature Co- Investigator (if any)

Recommended / Not Recommended Research Committee (with comments)

Rector & Registrar

Vice-Chancellor

FACULTY PROJECT

COMPARATIVE STUDIES OF THE POTENTIAL OF SOME EDIBLE MUSHROOMS AS SOURCE OF BIOACTIVE COMPOUNDS AND NUTRACEUTICAL AGENTS

A Project Report

Submitted by **Ms. Manjali Sharma** Assistant Professor Department of Home Science

Submitted to



THE IIS UNIVERSITY, JAIPUR (2017-2018)

FORMAT OF PROJECT REPORT

A. Preliminary Section

- 1. Title Page
- 2. Acknowledgments (if any)
- 3. Table of Contents
- 4. List of Tables (if any)
- 5. List of Figures (if any)
- 6. Abstract

B. Main Body

- 1. Introduction
- a. Statement of the Problem
- b. Significance of the Problem (and historical background)
- c. Purpose
- d. Statement of Hypothesis
- e. Assumptions
- f. Limitations
- g. Definition of Terms
- 2. Review of Related Literature (and analysis of previous research)

3. Design of the Study

- a. Description of Research Design and Procedures Used
- b. Sources of Data
- c. Sampling Procedures/ experimental techniques/procedures of theoretical research
- d. Methods and Instruments of Data Gathering/Equipments/ Databases and
- reference material
- e. Statistical Treatment

4. Analysis of Data

contains:

a. text with appropriate tables and figures

5. Summary and Conclusions

- a. Restatement of the Problem
- b. Description of Procedures
- c. Major Findings (reject or fail to reject H_o)
- d. Conclusions
- e. Recommendations for Further Investigation

C. Reference Section

- 1. End Notes (if in that format of citation)
- 2. Bibliography or Literature Cited
- 3. Appendix

Statement of Expenditure (2017-18)

Head : The IIS University Faculty Project Sanctioned Letter No. & Date – Date of completion of Project -Sanctioned Amount -Title of the project -Name of the supervisor -

Details of Expenditure :

S.NO.	Head	Sanctioned Amount	Details	Bill No.	Date	Amount (in Rs.)	Balance any)
1.	Books & Journals						
2.	Field Work & Travel						
3.	Equipment						
4.	Chemical & Glassware						
	Total	Rs.					

• Enclose the original bills regarding expenditure incurred.

Signature of Principal Investigator

Office Assistant (Project)

Signature Chief Accounts Officer

Signature of Registrar