FACULTY PROJECT

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

Project Plan Proposal

Submitted by

Ms. Manjali Sharma

Assistant Professor

Department of Home Science

Submitted to



IIS(Deemed to be University),

JAIPUR



IIS(Deemed to be 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. (O) |
| | | (R) |
| | | (M) |

| 6. Name of the Department where the project will be undertaken | | | | | | |
|--|--|--|--|--|--|--|
| eaching and Research Expe | erience of Prir | ncipal Investigator: | | | | |
| Teaching experience : | UG | years | | | | |
| F | PG | Years | | | | |
| P | h.D/ M.Phil. | Years | | | | |
| Research experience: | | | | | | |
| Whether the project ha please indicate : | s been appro | oved for the doctoral degree ? If so, | | | | |
| Date of Registration : | | | | | | |
| Name and designation of | the superviso | or approved by the University: | | | | |
| Name of the University /I | nstitute wher | e registered : | | | | |
| In case the principal inve | estigator hold | s a doctoral degree : | | | | |
| i. Title of the thesis | s: | | | | | |
| ii Year of the awar | d of degree: | | | | | |
| iii. Name of the Un | iversity: | | | | | |
| Publication: | | | | | | |
| (1) Papers Published (i) | • • | ccepted:Communicated | | | | |
| (ii) | | | | | | |
| (3) Books Published | (4) | Books AcceptedCommunicated | | | | |
| (i) | | | | | | |
| (iii) | | | | | | |
| | Teaching experience: Teaching experience: Research experience: Whether the project had please indicate: Date of Registration: Name and designation of the University /I In case the principal inversity in the inversity of the award in the University in the inversity of the award in the University in the inversity of the award in the University in the inversity in the inversity of the invers | reaching and Research Experience of Print Teaching experience: UG | | | | |

| (a) Teaching experience : | UG | years |
|-----------------------------------|-------------------|--|
| | PG | Years |
| | Ph.D/ M.Phil | Years |
| (b) Research experience | 2: | |
| (c) In case the Co- inve | estigator holds a | a doctoral degree : |
| i. Title of the | thesis: | |
| ii Year of the | award of degre | e: |
| iv. Name of the | ne University: | |
| d) Publication: | | |
| (1) Papers Publish (i) (ii) (iii) | (ij | 2) Accepted: Communicated) i) ii) |
| (3) Books Published | d (4 | 4) Books AcceptedCommunicated |
| (i) | _ (ii) | |
| (iii) | |) oks published and/or accepted during last |

PART -B

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 achieved
- (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. | Consumables | |
| 6. | Outsourcing | |
| 7. | Contingency (including special needs) | |
| | Total: | |

| 10. | fundin | ther the teacher has received support for the research project from any ng agency Major, Minor or any other scheme of support for research? If see indicate: | | | | | | | | | • |
|---|--|--|-------|---------------------------|-----------|---|-------------------|-------------|------------|-------|---------|
| (i) | Name of the agency from which the assistance was approved | | | | | | | | | | |
| (ii) | Sanction letter No. and date under which the assistance was approved | | | | | | | | | | |
| (iii) | ii) Amount approved and utilized | | | | | | | | | | |
| (iv) | (iv) Title of the project for which assistance was approved | | | | | | | | | | |
| (v) | | | | project was (Yes/ No) | | eted | , whether the | work | on the | proje | ect has |
| | If yes give the details:- | | | | | | | | | | |
| | S.No. Name of Journal | | | | ISSN No. | | Vol. No. | Page No. | 3 | | |
| | | | | | | | | | | | |
| (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 | | | | | | | | | | | |
| 11. | (a) De | tails | of th | ne project/s | cheme (| comi | oleted or ongoir | na wit | th the P.I | | |
| Nan of th | ne ne | Year | | | Tota | Equipment/Infrastructural facilities obtained | | | ies | | |
| uge | incy | Start | red | Completed | | | | | | | |
| | Institu ipment | | al ar | nd Departme | ental fac | cilitie | s available for t | the p | roposed w | /ork: | |

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 University is 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



IIS(Deemed to be University),
JAIPUR
(2018-2019)

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. Research Problem
- b. Description of Research Design and Procedures Used
- c. Sources of Data
- d. Sampling Procedures/ experimental techniques/procedures of theoretical research
- e. .Methods and Instruments of Data Gathering/Equipments/ Databases and reference material
- f. 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 H₀)
- 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 (2018-19)

Head: IIS (Deemed to be University), Jaipt

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 | Sanctio ned Amo unt | Details | Bill No. | Date | Amount (in Rs.) | Balance any) |
|-------|---|------------------------------|---------|----------|------|-----------------|-----------------|
| 1. | Books & Journals | | | | | | |
| 2. | Field Work & Travel | | | | | | |
| 3. | Equipment | | | | | | |
| 4. | Chemical & Glassware | | | | | | |
| 5. | Consumable | | | | | | |
| 6. | Outsourcing | | | | | | |
| 7. | Contingency (Including special needs) | | | | | | |
| /. | Total | Rs. | | | | | |

 $[\]hfill\Box$ Enclose the original bills regarding expenditure incurred.

Signature of Principal Investigator

Office Assistant (Project)

Signature Chief Accounts Officer

Signature of Registrar