# **STUDENTS PROJECT**

**Title of the Project** 

**Project Plan Proposal** 

Supervised by

Name of Supervisor

Designation & Department

Submitted by

Name of Candidate

Class & Department

Submitted to



IIS(Deemed to be University), JAIPUR

(2022-2023)

# FORMAT FOR SUBMISSION OF PROPOSAL FOR STUDENTS PROJECT PART – A

1.	Name of the Department where the project will be undertaken :			
2.	Broad area of proposed research			
3.	Applicant			
	(i)	Name :		
	(ii) Class with Seme		ester:	
	<ul><li>(iii) IISU Enrolment</li><li>(iv) Date of Birth :</li></ul>		No.:	
	(v)	Telephone No.	(R)	
	(vi)	Email :	(M)	
	(vii) Residential Address :			

Name of the Supervisor

4.

#### PART – B

### **Proposed Research Work**

1.

- (i) Project Title
- (ii) Origin of the research problem
- (iii) Review of Research and Development in the subject :
- (iv) Objectives
- (v) Methodology
- (vi) References
- (vii) Plan of work and targets to be achieved
- (viii) If the candidate is working for the project/dissertation (A summary of the report/thesis in about 200 words may please be attached with the application)
- (ix) Details of collaboration, if any (intended)

### 2. Estimated Expenditure

S.No.	Item	<b>Estimated Expenditure</b>
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:-	

- **3.** Institutional and Departmental facilities available for the proposed work :
- **4.** Any other information which the applicant may like to give in support of this proposal which may be helpful in evaluating.

### **Declaration by the Applicant**

### To certify that:

- (i) I/we shall abide by the rules governing the scheme in case assistance is provided to me/us from the IISU for the above project
- (ii) 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.

# Applicant Name & Signature

### **Declaration by the Supervisor**

### To certify that:

- (i) The proposed project has potential for primary research and the outcome the project may prove to be valuable addition to the subject knowledge, or The project is of interdisciplinary nature and its outcome may be quite useful.
- (ii) General physical facilities, such as furniture/space etc., are available in the Department/College.
- (iii) The above research Project is not funded by any other agency.

**Supervisor Name & Signature** 

**Recommended/Not Recommended** 

**Research Committee (with comments)** 

Registrar

**Vice Chancellor** 

# **STUDENTS PROJECT**

**Title of the Project** 

**Project Report** 

Supervised by

Name of Supervisor

Designation & Department

Submitted by

Name of Candidate

Class & Department

Submitted to



IIS(Deemed to be University), JAIPUR

(2022-2023)

# The report should be consists of

- Cover page
- Certificate by the supervisor
- Index
- Abstract
- Introduction
- Review of Literature / Back ground of the problem
- Methodology (Observation / Data Collection)
- Data analysis and Results
- Conclusion
- References

It is hereby certified	that <b>Ms.</b>	,	student of		
	Enrollme	nt No	of		
IIS (Deemed to be Unive	ersity) Jaipur	has worked under my	y supervision		
for Stude	nt	Project	entitled		
<i>"</i>		" funded by IIS	(Deemed to		
be University) Jaipur. She has completed her work sincerely in the					
prescribed period. To t	:he best of	my knowledge, it is	an original		
contribution and has no	t been submi	tted for any other de	egree of any		
University. I consider t	:his Student	project is fit in all	respect for		
submission to the University.					

Date:-

**Signature of Supervisor of the Department** 

# Statement of Expenditure (2018-19)

Name: IIS (Deemed to be	e University) Jaipur, Student	ts project
Sanctioned Letter No. & I	Date	
Name of the candidate	-	
Title of the project	-	
Name of the supervisor	-	

### **Details of Expenditure:**

S.NO.	Head	Sanctioned Amount	Details	Bill No.	Date	Amount (in Rs.)	Balance (if any)
1.							
2.							
3.							
4.							
	Total	Rs.					

• Please enclose the original bills regarding expenditure incurred.

Signature of Student	Signature of Supervisor
Received two copies of Project Report	Office Assistant (Project)
(Section Officer, Research)	

**Signature of Registrar Signature Chief Accounts Officer**