STUDENTS PROJECT

Title of the Project

Project Plan

Supervised by **Name of Supervisor** Designation

Submitted by

Name of Candidate

Class & Department

Submitted to



THE IIS UNIVERSITY, JAIPUR (2017-2018)

FORMAT FOR SUBMISSION OF PROPOSAL FOR STUDENTS PROJECT PART – A

L.	Na	ame of the Department where the project will be undertaken:
2.	Br	oad area of proposed research
3.	Ap	pplicant
	(i)	Name :
	(ii)	Date of Birth:
	(iii)	IISU Enrolment No. :
	(iv)	Email:
	(v)	Telephone No. (R)
		(M)
	(vi)	Class with semester :
	(vii)	Residential Address :

4. Name of the Supervisor

PART - B

Proposed Research Work

-	
-	

- (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

- (i) Books and Journals
- (ii) Equipments, if needed (please specify name and approx. cost)
- (iii) Field Work and Travel
- (iv) Chemicals and glasswares
- (v) 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

A Project Report

Supervised by **Name of Supervisor** Designation

Submitted by

Name of Candidate

Class & Department

Submitted to



THE IIS UNIVERSITY, JAIPUR (2017-2018)

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

Certificate

It	is	hereby	certified	that	Ms.				of
			has i	ncorpo	rated	the sugge	estions	and	also
ma	de	modifica	tions sug	gested	l at th	ne time of	preser	ntatio	n in
the			Student			Project		t	ilted
''								<i>"</i>	

Signature

Name of the Supervisor

Certificate

It is	hereby	/ certified	that Ms.		,	student	of
			Enrollm	ent No			of
The II	S Unive	ersity, Jaipui	has worked	l under my	supervisio	n for Stud	ent
Projec	t entitle	ed "				." funded	by
The II	S Unive	ersity, Jaipui	r. She has co	ompleted h	ner work sir	ncerely in	the
prescr	ibed pe	eriod. To t	he best of	my know	ledge, it is	an origi	nal
contril	oution a	and has not	been subm	itted for a	ny other d	egree of a	any
Univer	sity. I	consider t	his Student	project is	fit in all	respect	for
submi	ssion to	the Univers	sity.				

Date:-

Signature of Head of the Department

Statement of Expenditure (2017-18)

Head: The 1	IIS U	niversity	y Students	project
Sanctioned	Lette	er No. &	Date -	

Sanctioned Amount

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