**The University of Peradeniya**

**Application for University Research Grants**

**Year……..…..**

**Closing Date:**

**Note: All applicants should fill out Parts I and II of the application.Before the closing date, three copies of the Completed Application Form should be submitted to the Dean of the respective Faculty through the Head of Department.**

**Part I – Information about the Applicant**

1. Name of Applicant: Rev./Prof./Dr./Mr./Ms. ..…………………..…………………………..

………………………………………………………………………………………….

2. Department & Faculty………………………………………………………………………..

3. Contact telephone number(s)………………………………………………………………….

 E-mail…………………………………………………………………………………….

4. Present Position/Designation …………………………………………………………………

5. Please state whether you are confirmed in your position …………………………………….

| 6. Academic qualification: Degree/ University/ Year………………………………………………………………………………………………………………………………………………….7. Your Field of specialization…………………………………………………………………... |
| --- |
| 8. Are you due for sabbatical leave/short term leave during the next 2 years. If so give details ………………………………………………………………………………………………….………………………………………………………………………………………………….. |

9. Please state whether this research is in connection with a higher degree for which you have been registered. Yes/No. (If yes, please provide the following information)

 (a) Degree registered for:……………………………………………………

 (b) Date of registration………………………………………………………

 (c) Faculty/ Institute…………………………………………………………

 (c ) Name of Supervisor(s) ………………………………………………….

10. Please list any previous university or other grants you have received.

 (Funding source, duration & amount)

 (i)……………………………………………………………………….

 (ii)………………………………………………………………………

11. Are you currently involved in a project ? Yes/No If yes,

Name the funding source/ amount / whether collaborative or not…………………………

……………………………………………………………………………………………..

12. Please list 3 of your recent publications:

1. …………………………………………………………………………………………..

 ……………………………………………………………………………………………

(ii)…………………………………………………………………………………………….

……………………………………………………………………………………………….

 (iii)………………………………………………………………………………………………

13. Names & Affiliations of Local Collaborators of the Project (if any):

(i)………………………………………………………………………………………….

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(ii)………………………………………………………………………………………..

14. Names & Affiliations of foreign Collaborators of the Project (if any):

…………………………………………………………………………………………………..

……………………………………………………………………………………………………

……………………………………………………………………………………………………

15. Have you received any grants from outside for this/similar project? Yes/No If Yes,

Please state the Funding Organization & Amount…………………………………….

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16. List the equipment/resources/facilities available in your Department/Faculty for your research

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**Part II- Project Proposal**

(Attach a separate, typed document giving the following details)

1. Title of the Project
2. Background/justification/rationale of the project
3. Research problem /research question that your research seeks to address
4. State the hypothesis to be tested (if any)
5. List the Objectives of the research
6. Describe the Methodology to be used to achieve each of the objectives you have listed
7. List the Data you plan to collect
8. Duration of the Project

9. List the activities & data to be collected during the first 6 months of the project period

 10. List the activities & data to be collected during the last 6 months of the project period

 11. Indicate the Statistical analysis you intend to use (if any)

1. Give a List of References cited ( Please use Author /Year System):
2. State the Overall relevance/importance of the project to the Applicant/ Department / Faculty /University/ Society
3. Whether Ethical Clearance has been obtained (if relevant)

 15. Budget (Indicate the amounts under the following items)

 Amount

1. Literature Survey ……………………………
2. Stationery……………………………
3. Postage ……………………………

 (iv) Equipment \* ……………………………

 (v) Chemicals \* …………………………….

 (vi) Consumables \* ……………………………

 (vii) Travel\*\* ……………………………

 (viii) Data processing ……………………………..

 (ix) Field assistance ………………………………

 (x) Laboratory Services & Sample analysis. ...........................................

 (xi) Other (please specify) ………………………………..

 ………………………………..

 Total ………………………………..

\* Provide a list of items with quantities and costs

\*\* Provide details of travel giving destination/ distance/frequency of travel/mode of travel

I certify that the information given above is true and correct.

………………… ………………………

Date Signature of Applicant

**III Official Recommendations**

1. Observations/Recommendations of the Head of the Department…………………………

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………………………… ………………………….

Date Signature

1. Observations/Recommendations of the Faculty Research Committee

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Date Signature of Chairperson/Faculty Research Committee

1. Observations/Recommendations of the Dean

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Date Signature of Dean

1. Observations/Recommendations of the Senate Research Committee

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Date Signature of Registrar/Academic & Council

Names & Affiliations of 3- Reviewers of the research proposal (preferably from other faculties/outside institutions)

1. …………………………………………………………………………..
2. ……………………………………………………………………………..
3. ………………………………………………………………………………

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