### MINISTRY OF AYURVEDA, YOGA & NATUROPATHY, UNANI, SIDDHA AND HOMOEOPATHY

### APPLICATION FOR GRANT-IN-AID OF EXTRA MURAL RESEARCH PROJECTS IN AYUSH

#### Section-A

1.	Title of t	he Research	Project:
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2. D	etails of the	<b>Institution</b>	submitting	the	research	) project
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Name:

Postal address:

Telephone:

Fax:

E-mail:

3. In case of individuals submitting the research project:

(Name of the collaborating institute may be cited in S.No. 2 above)

Name of the individual:

Postal address:

Telephone:

Fax:

E-mail:

4. Name and Designation of

Principal Investigator:

Co-Investigator(s):

Consultant (s):

- 5. Duration of Research Project:
  - i) Period required for pre-trial preparations:
  - ii) Period that may be needed for collecting the data:
  - iii) Period that may be required for analyzing the data:
- 6. Amount of Grant-in-aid asked for:

	Total	1st	2nd	3rd	Remaining	Withheld
		Install-	Install-	Install-	Amount	Amount
		ment	ment	ment	(10%)	(10%)
Salary						
Equipment						
Books						
Other Non-Recurring						
Expenditure						
Recurring Expenditure				···-		
TA/DA						
Institutional Support						
Fee of Pl and Col						
Miscellaneous						
Expenses						
Total		1		<del></del>		

#### 7. DECLARATION AND ATTESTATION

#### **Certified that:**

I/We have read the provisions, terms and conditions, mentioned in the Extra-mural Scheme along with its Annexure, Guidelines formulated by the Ministry of AYUSH and I/we shall abide by the relevant provisions contained under EMR Scheme and General Financial Rules of Govt. of India.

#### Name and Signature of the:

- a) Principal Investigator
- b) Co-Investigator(s)
- c) Head of the Department

#### Signature of the Head of the Institution

Place:

Date:

LIST OF DOCUMENTS TO BE ENCLOSED: (As per para 6.7.4 of the scheme and as uploaded on the website)

# Section – B FORMAT FOR BIO-DATA OF THE INVESTIGATORS (PI, Co-I(s), Consultants)

1.	Name (Dr./Mr./Ms.):	First name(s)	Surname	<del>-</del>
_	Designation	FIISt Hame(3)		
2.	Designation:	and DIN		
3.	Complete Postal Add Telephone Number(s)	resses and Fin. ), Fax, E-mail		
4.	Date of birth:			~
5.	Educational Qualifica Degree	tion: Degrees obtained Institution	d (Begin with Bach Field(s)	elor's Degree) Year
6.	Research Experience Duration (From-To)	Institution	Particulars o	of work done
7.	Other Experience (Ap Duration (From-To)	part from Research) Institution	Particulars o	of work done
8.	Research Specializati (Major scientific field	ion ds of interest)		
9.	Financial support rea a) From the Minist Past	ceived try of Health and Fami	ly Welfare	·
#I	Present Pending		·	
	a) From the Minis	try of AYUSH		
	Past	,		
	Present			•
	Pending			
	b) From other Ins	titutions		
20	Past	4		
	Present	w .		,
	Pending		C. N. M. indexes of O	F AVLICH
10.	Research projects in	n hand under EMR Sch	neme of Milnistry o	- ma of Covernment
11.	Research projects i	n hand under any oth	er Grant-in-aid sch	eme of dovernment
	of India			
12.	Other research pro	jects, if any:		) also papers in
13.	Recent publication press	ns (last 5 years, with	titles and referen	ices), aiso papers iri
14.		if any:		
				Signature
		T .		Date

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## Section – C \*BRIEF SUMMARY OF THE RESEARCH PROPOSAL

[Adequate information must be furnished in a brief but self-contained manner to enable the Ministry to assess the project]

- 1. Title of the Research Project
- 2. Objectives
- 3. Methodology
- 4. Anticipated Outcome
- 5. Summary of the proposed research (**up to 150 words**) indicating overall aims of the research, importance of the objectives and their application in the context of the priority areas set out in the application form.
- 6. Relevance and usefulness of the study with particular reference to concerned AYUSH system.
  - i. IPR values
  - ii. Translational value
  - iii. Utilization of outcomes of project

# Section - D DETAILED RESEARCH PROTOCOL

Give here the design of study as per guidelines for clinical trial protocol including toxicity investigators, indicating the total number of the cases/samples to be studied, as well as the mode of selection of subjects specially in experiments involving human subjects, equipment and other materials to be used, the techniques to be employed for evaluating the results including statistical methods, etc. Also detail the standard operational procedures (SOPs) for preparation of trial drugs and method of selection of ingredients should also be specified. Facilities in terms of equipment, etc., available at the institution for the proposed investigation are to be specified.

(Also, the Investigator is required to go through the GCP guidelines for ASU drugs published by Ministry of AYUSH, Good Clinical Practices (GCP) for Clinical Research in India provided by Central Drug Standard Control Organisation (CDSCO), Directorate General of Health Services, Ministry of Health and Family Welfare, Govt. of India.)

See Annexure - 2 and 3 for preparation of detailed research protocol.

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