

**Application No :**  
*for office use RMC*

**Form RIC 02AP**

**Application No :**  
*for office use RIC*

**New Project / Continuing project**  
(Please strike through in applicable)

**South Eastern University of Sri Lanka**  
**Application for University Research Grants**

**Year: 20.....**

**Closing Date:** 31<sup>st</sup> December 20..... / 30<sup>th</sup> June 20.....

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

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**Part I– Information about the Applicant**

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

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2. Department:.....

3. Faculty:.....

4. Contact telephone number(s):.....

E-mail:.....

5. Present Position/Designation:.....

6. Please state whether you are confirmed in your position:.....

7. Highest Academic qualification: Degree:.....

University and Year:.....

8. Your Field of specialization:.....

9. Are you due for sabbatical leave/short term leave during the next 2 years? Yes/No, If so give details:

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10. 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:.....

(d) Name of Supervisor(s):.....

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11. Please list any previous (with in last five years) University or other grants you have received. (Funding source, duration & amount)

(i).....

(ii).....

(iii).....

12. Are you currently involved in a project? Yes/No. If yes, Name the funding source/ amount /whether collaborative or not

(i).....

(ii).....

(iii).....

13. Please list 3 of your recent publications:

(i) .....

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(ii).....

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(iii).....

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

(i) .....

(ii) .....

15. Names & Affiliations of Foreign Collaborators of the Project (if any):

(i) .....

(ii) .....

(iii) .....

16. Have you received any grants from outside for this/similar project? Yes/No  
If Yes, please state the Funding Organization & Amount

(i) .....

(ii) .....

17. List the equipment/ resources/ facilities available in our Department / Faculty / University  
for your research

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### **Part II- Project Proposal**

(Attach a separate, typed document giving the following details, up to 6 pages of A4 size paper)

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 second 6 months of the project period
11. Indicate the Statistical analysis you intend to use (if any)
12. Give a List of References cited (Please use Author / Year System):
13. State the Overall relevance /importance of the project to the Applicant/ Department / Faculty / University/ Society
14. Whether Ethical Clearance has been obtained (if relevant)
15. Budget (Indicate the amounts under the following items)

No	Item	Amount (Rs.)		
		1 <sup>st</sup> year	2 <sup>nd</sup> year	3 <sup>rd</sup> year
1	Literature Survey (Photocopying, to buy journals / materials, books etc.)			
2	Stationary, consumable and Postage (Specify by items and quantity with approximate cost)			
4	Equipment (Provide a list of items with quantities and costs)			
5	Chemicals (Specify items, quantities with approximate cost)			
7	Travelling (Provide details of travel giving destination/ distance/ frequency of travel/ mode of travel)			
8	Data processing (needed facility and services with approx. cost)			
9	Field assistance (needed facility and services with approx. cost)			
10	Laboratory Services & Sample analysis			
11	Publication / presentation			
12	Other (please specify)			
	Total			

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

.....  
Signature of Applicant

.....  
Date

### III Official Recommendations

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

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Names & Affiliations of 3-Reviewers of the research proposal (preferably from other Faculties/outside institutions not relevant to the project)

(i) .....

(ii) .....

(iii) .....

.....  
Date                                  Name and Signature of the Head of the Department

2. Observations/Recommendations of the Faculty Research Management Committee

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Date                                  Name and Signature of Chairperson, RMC

3. Observations/Recommendations of the Dean / Librarian

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Date                                  Signature of Dean / Librarian

4(a). Observations/Recommendation of the AR / SAR, Research and Innervation Centre

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Date Signature of AR / SAR, RIC

4(b). Observations/Recommendation of the Director, Research and Innervation Centre

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Date Signature of Director, RIC

5. Observations/Recommendation of the Research and Publication Committee

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Date Signature of Chairperson, RPC