# Office of Research Innovation and Commercialization (ORIC) Rawalpindi Medical University

**FUNDING APPLICATION FORM FOR RESEARCHERS**

| **1. RESEARCH PROPOSAL/PROJECT INFORMATION** |
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| **Proposal Details** |
| --- |
| Title of the Research Proposal |   |
| Research Area  |   |
| Duration |   |
| Proposed Budget  |   |
| Proposed Start Date |   |
| Principal Investigator | Name: Email:  |
| Graduate Program that the proposal aligns with |  |
| Executive Summary of the project, (Max. 500 words) |   |
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| Research/Academic Objectives |   |

* Problem Statement:
* Measurable outcomes of project (Specify all measurable outcomes of the project, such as journal papers, grants, collaborations established):
* Milestones of the project (Provide quarterly deliverables with dates):
 |
| **2. DETAILS OF THE RESEARCHER** |
| **2-1. Name of The Researcher:** |
| **2-2. Designation:** |
| **2-3. Department** | **2-4. Employee Code** |
| **2-5. Cell** | **2-6. Email:** |



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| **3. BUDGET ESTIMATION** |
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| 3-1. ESTIMATED BUDGET FOR THE PROPOSED RESEARCH PERIOD (Please submit Excel sheet separately)

| Sr# | **Items** | **Description of Activities** | **Duration** | **Amount Requested** |
| --- | --- | --- | --- | --- |
| 1 | Senior Personnel (Names) |  |  |  |
| 2 | Other Personnel (Names) |  |  |  |
|  3 | Conferences/workshops |  |  |  |
| 4 | Travel |  |  |  |
| 5 | Consultant Fee |  |  |  |
| 6 | Printing |  |  |  |
| 7 | Dissemination Costs |  |  |  |
|  | Total Costs |  |  |  |

 *\*Rows can be added under respective categories to further specify the items.*  *\*Categorization of Direct and Indirect Costs can be specified according to Memorandum of Understanding (MOU)***3-2. Equipment/Machines/Apparatus etc.**This may include necessary Chemicals, Glassware, Consumables, Accessories, Lab equipment, Machines and Apparatus to carry out the applied research. The applicant will have to justify the procurement of equipment and apparatus in the context of his/her research proposal/project\* Attach separate sheet if necessary |
| **4. PARTNER INDUSTRY (if any)** |
| **4-1. Name and Address:** |
| **4-2. Contact:** | **4-3. Email:** |

**Undertaking and Endorsement**

I hereby solemnly declared that:

1. I am not defaulters of any HEC scholarship Program (foreign and indigenous) or any other.
2. All the information provided above is true to the best of my knowledge and belief.
3. If the grant is provided, I shall solely be responsible for its proper utilization.
4. All the supporting documents submitted are authenticated.



# Researcher Signature

| **Approved By** |
| --- |
| **Director (ORIC)**Name:Signature: | **Vice Chancellor (RMU)**Name:Signature: |

**Office of Research Innovation and Commercialization (ORIC)**

**Rawalpindi Medical University**



1. Project must solve some current problem, improve economics or add value in social life.
2. Project’s Term of Reference (TOR) needs to be clear in terms of role, payments, time and deliverables.
3. RMU-ORIC will work for commercialization/patent filing of these projects.
4. Researcher will be credited as inventor of technology and get share from financial proceeds if any as per RMU-ORIC policy.
5. Project technology will be property of RMU.
6. Ensure to attach detailed list (with quantity and cost of each item) (in original) for Lab Chemicals/Glassware/Consumables/Accessories etc.
7. University evaluation will be mandatory in case any dispute arises between researcher and RMU.

**Application Submission Checklist**

# Please check the appropriate option

| **1** | Objective & Scope of Project is clearly defined | **YES** | **NO** |
| --- | --- | --- | --- |
| **2** | Project has commercial potential | **YES** | **NO** |
| **3** | Project deliverables are agreed upon industry (If Industry Partner) | **YES** | **NO** |
| **4** | Application must be routed through respective Dean’s office to ORICs office | **YES** | **NO** |
| **5** | Copy of CNIC & Passport size photograph of Principle Investigator | **YES** | **NO** |
| **6** | Industrial support letter from partner industry with their NTN/STN | **YES** | **NO** |
| **7** | Personnel cell number and official email  | **YES** | **NO** |
| **8** | CV of PI and of Co PI (if any) | **YES** | **NO** |
| **9** | CV of Industrial Partner | **YES** | **NO** |
| **10** | Quotations of the equipment & supplies (if needed) | **YES** | **NO** |
| **11** | Budget should also be submitted on excel sheet sent with soft copy  | **YES** | **NO** |
| **12** | Application package must have world file, PDF, Budget & Information sheet (Excel) | **YES** | **NO** |
| **13** | Hard copies with proper tape binding (no spiral binding will be accepted)  | **YES** | **NO** |
| **14** | Soft copy must be in one application file (Word & PDF) & emailed to Manager.oric@rmur.edu.pk  | **YES** | **NO** |
| **15** | Authentication from Vice Chancellor’s office | **YES** | **NO** |
| **16** | Both hard and soft copy must reach well before the deadline | **YES** | **NO** |