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SRI LANKA
COUNCIL FOR AGRICULTURAL RESEARCH POLICY
Application for Competitive Contract Research Grant
Projects/Programmes
(Please refer to the guideline for completion of the application form)

1. Project Identity :

1. A Project title :

1. B Name and Address of submitting institution :	1.C Locations where the project Programme is to be conducted.
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2. Project Management :

2. A Principal Investigator
1. Name :
2. Designation :
3. Academic qualifications :
4. Field of specialization :
5. Address/Tel. Nos. e-mail :
6. Recent publications (last 3 years.) :

2. B1 Collaborating Scientist/Supervisor (✓) mark as appropriate (✓)

1. Name :
2. Designation :
3. Academic qualifications :
4. Field of specilization :
5. Address/Tel. Nos. e-mail :
6. Recent publications (last 3 years):

2. B2 Collaborating Scientist/Supervisor (✓) mark as appropriate (✓)

1. Name :
2. Designation :
3. Academic qualifications :
4. Field of specilization :
5. Address/Tel. Nos. e-mail :
- 6.** Recent publications (last 3 years):

2.B3 Collaborating Scientist/Supervisor (✓) mark as appropriate (✓)

1. Name :
2. Designation :
3. Academic qualifications :
4. Field of specilization :
5. Address/Tel. Nos. e-mail :
6. Recent publications (last 3 years) :

2.C Other Staff (category and number of personnel)

1. Name :
2. Designation :
3. Academic qualifications :
4. Field of specilization :
5. Address/Tel. Nos. e-mail :
6. Recent publications (last 3 years):

3. Scientific Background of the Project/Programme and Justification

3.A Identification and significance of the problem and its current Relevance :
(use additional sheets if necessary)

3.B Relevant Research performed, or in progress in Sri Lanka

3.C Relevant Research performed or in progress elsewhere:

4. Scientific scope of the project :

4.A Specific research objectives :

4.B Methodology (Include Proposed experimental methods and Techniques and Data analyses procedures in detail)

4.C Annual work plan (List all activities to be undertaken for each year of the Project/Programme)

4.D Project Duration

4.E Time Frame and Schedule of Activities

4.F Expected Project Output

4.G Technology Transfer

(give proposals for technology/information communication of project results to scientists, extension workers and other stakeholders : Indicate possible adaptive research need.)

**5. 1. Is the proposed research currently being supported by any other grant?
If so, indicate name of granting agency, amount provided and duration.**

**11. Is the application currently being considered elsewhere for funding ?
If so what organization, by what date is a decision expected.**

6. Operational budget :

6. A Salaries and Wages : (Project personnel & estimated percentage of working time devoted to project)

i. Available on the payroll at the grantee and collaborating institutions (cost to be born by grantee/collaborating institutions)

Staff Category (including labour)	Working time (%)	Estimated Project Cost (Rs.)

ii. To be recruited on contract, using project funds.

Staff category including labour	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)
Research Assistants * Rs. 7,000/=p.m.						
University Fees						
Technical Assistants Rs. 4,000/= for A/L's or Rs. 3,500/= for O/L's. (See details)						
Labour Number Days/year						
Total						

* Indicate whether Research Assistant will be enrolled for postgraduate degree, if so include university fees separately.

6. B Equipment needed: (List each item separate, with approximate value

Laboratory Equipment (Itemize, give details)	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)
Total						

6.C Expendable Supplies :

Consumables (Give details of : Item, quantity and cost)	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)

Total						
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6.D Travel (fuel) & Subsistence : (At institutions where vehicles are not provided, mileage payments on personal/hired vehicles at specified rates will be considered. If institution vehicles are used indicate fuel cost separately)

Travel & Subsistence (Give details)	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)
Principal Investigator/s Destination Mode of transport Number of visits/month Return distance/visit (km) Total cost						
Research Assistant/s Technical Assistance/s Destinations Mode of transport Number of visits/month Return distance/visit (km) Total cost						
Driver Subsistence/no of Visits/month Total cost						
Total						

6. E Other costs: Please provide full details, if needed. Do not include any item specifically excluded in the Guidelines provided.

Other miscellaneous costs. (Give details.)	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)
Total						

6. F Budget summary

	Year 1 (Rs.)	Year 2 (Rs.)	Year 3 (Rs.)	Year 4 (Rs.)	Year 5 (Rs.)	Total (Rs.)
1. Personnel Research Assistant/s Technical Assistant/s Labour						
2. Equipment						
3. Expendable Supplies						
4. Travel & Fuel						
5. Other Costs						
Total						

Total Estimated Project Cost Rs.

7. Physical facilities currently available which would be used for the project.

Land, buildings, equipments (name and model), and material :

8. Does the Institution have Legal Status? Yes/No. If not, indicate appropriate contract point.

Contract Point :

9. Proposed Date of Commencement of Project :

10. Signatures :

Principal Investigator

Date :

Signature

Collaborating Scientist 1/ Supervisor

Date :

Signature :

Collaborating Scientist 2/ Supervisor

Date :

Signature

Collaborating Scientist 3/ Supervisor

Date :

Signature

11. Recommendations

When forwarding application the Heads of Institutions are expected to consider the following aspects- that there is no duplication in funding for the project and that the applicant will be able to devote sufficient time to carry out the project. (If the applicants are from different institutions, recommendations from each institution should be submitted)

(a) * For applicants from Universities

I confirm that I have read the application and that the facilities mentioned in Section (7) will be made available for this project. The project is recommended.

.....

Signature of Head of Department
Date

.....

Signature of the Dean of the Faculty
Date

I recommended and forward the application

.....

Signature of the Vice Chancellor

Date

(b) For applicants from Postgraduate Institutes, Government Departments, Corporations and Boards and Private sector**

I confirm that I have read the application and that the facilities mentioned in Section (7) will be made available for this project. The Project is recommended.

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Signature of Director, Postgraduate Institute of Agriculture

Date

I approve and recommend the project

I confirm that I have read the application and that the facilities mentioned in Section (7) will be made available for this project. The Project is recommended.

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Signature of Head of Institution/Director of Institute/Organization