

INDIAN CHEST SOCIETY

Application Format for Grant for Multi-centric Research Project

1. **Title of the Research Project**
2. **Hypothesis and objectives:** Scope & significance of the project and its relevance to the National health issues
3. **Proposed research project summary (not exceeding 150 words)**
4. **Detailed research plan.** (Design, inclusion & exclusion criteria, sample size with appropriate calculations, detailed methodology and techniques to be employed for the project, including statistical methods any potential to obtain patents etc.)
5. **Investigators and institutions of the proposed project**

Investigators	Residential Address	Email	Mobile No	Name of Institute	Address
Principal investigator					
Co- PI (1)					
Co- PI (2)					
Co- PI (3)					
Co- PI (4)					
Co- PI (5)					
Co- PI (6)					
Co- PI (7)					
Co- PI (8)					

6. Duration of Research Project

- i) Duration of the proposed project:
- ii) Estimated time for data analysis:

7. Amount of grant-in-aid asked for

Total	1 st year	2 nd year	3 rd year
i) Staff			
ii) Contingencies Recurring Non recurring (equipment) Travel			
iii) Overhead charges			
Total			

8. Institution responsible for the research project

- a) Name :
 - b) Postal address:
 - c) Telephone:
 - d) e-mail :
 - e) Details of Bank account
 - f) Name of person who will supervise project if PI leaves the project
9. The Institution where the study is being done should ensure that there is no financial conflict of interest by the investigators.

Note:

- 1. Ethics committee approval for the study will be obtained by investigators
- 2. Registration in Clinical trial registry will be done by investigators.
- 3. The biological samples will not be transported out of the country without proper permission.

Undertaking by investigator

- 1. I/We agree to submit within one month from the date of termination of the project the final report.
- 2. I/We agree to submit audited statement of accounts duly audited by the auditors as stipulated by ICS.
- 3. I/We will ensure that the publication arising from the project will have due acknowledgement of the support and financial contribution from the ICS.
- 4. I/We agree to submit (online) all the raw data (along with descriptions) generated from the project to the ICS within one month from the date of completion /termination of the project.
- 5. I/We agree to submit 6 monthly report of the progress of the study to the secretary of the ICS and ICS research coordinator .
- 6. I/We understand that it is our duty to inform the secretary of the ICS and ICS research coordinator of any patency that may arise from this project.
- 7. The study is not a clinical drug trial.

Signature of the:

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

Signature of the Head of the Institution with seal

BIODATA OF THE INVESTIGATORS (Attach separate sheet for each investigator)

1. Name _____

2. Designation: _____

3. Complete Postal Address, Telephone Number, Fax, e-mail etc.

4. Date of Birth: _____

5. Educational Qualification : Degrees obtained

Degree	Institution	Field(s)	Year

6. Experience

Duration	Institution	Particulars of work done

7. Major Research work done

8. A. Research projects completed

B. On-going projects

9. List your Important Pubmed indexed publications in the past 5 years :

10. List all your publications pertaining to the area of research: