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| IIT INDORE | Indian Institute of Technology Indore  Promotion of Research and Innovation for  Undergraduate Students (PRIUS) |

Note: Sections I to V should be filled by the student.

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| **I. Student details:** | | | | | | |
|  | Name: | | |  | | |
|  | Roll Number: | | |  | | |
|  | Email: | | |  | | |
|  | Phone number: | | |  | | |
|  | Address: | | |  | | |
| **II. Project details:** (attach separate sheet, if required) | | | | | | |
|  | Title: | | |  | | |
|  | Brief write up:  (maximum 1000 words) | | |  | | |
|  | Start date: | | |  | | |
|  | End date: | | |  | | |
|  | Potential benefits: | | |  | | |
|  | | Travel involved: | | Yes/No  (if Yes, please provide the additional information as mentioned below) | | |
|  | | | Name of institute: |  | | |
|  | | | Duration of travel: |  | | |
|  | | | Address: |  | | |
|  | | | Name and contact details of supervisor at the other institute: |  | | |
|  | | | Please attach a letter of consent (for visiting abroad) from parents along with commitment of financial support: |  | | |
| **III. Supervisor at IIT Indore:** | | | | | | |
|  | | | Name of supervisor: |  | | |
|  | | | Email: |  | | |
|  | | | Phone: |  | | |
|  | | | Name of co-Supervisor: |  | | |
|  | | | Email: |  | | |
|  | | | Phone: |  | | |
| **IV. Financial Support:** | | | | | | |
|  | | | Amount requested: |  | | |
|  | | | Justification: |  | | |
| **V. Undertaking:** | | | |  | | |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ son/daughter of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ studying as an \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at Indian Institute of Technology Indore, hereby undertake to comply with the following terms and conditions for the PRIUS scheme. | | | | | | |
| (i) I ensure that the research project under PRIUS scheme will have a duration of at least six months. | | | | | | |
| (ii) I ensure that the research project under PRIUS scheme will not in any way adversely affect my regular academic obligations and requirements for the degree for which I am enrolled at IIT Indore. | | | | | | |
| (iii) I ensure to complete the research project under PRIUS scheme before the end of final semester of coursework. | | | | | | |
| (iv) I shall submit two copies of the final report (in original) bearing my signatures and that of faculty supervisor/s at IIT Indore on completion of the project. One copy of the report will be submitted to the Head of the discipline and other to Research and Development office. | | | | | | |
| (v) I fully understand that IIT Indore will only cover partial costs associated with research work under PRIUS scheme. | | | | | | |
| (vi) I fully understand that if the final report of research work under PRIUS scheme is not submitted, IIT Indore may withhold the award of degree for which I am enrolled. | | | | | | |
| (vii) I fully understand that IIT Indore shall by no means be liable and accountable for any incident/accident that may occur outside the premises of IIT Indore. | | | | | | |
| (viii) I will abide by the rules and regulations of IIT Indore, failing which, the institute reserves the right to withdraw support for the PRIUS scheme at any time, and initiate necessary proceedings as applicable. | | | | | | |
| Date: | | | | | | |
| Place: | | | | | | Signature of student |
|  | | | | | | |
| Signature/s of faculty supervisor/s at IIT Indore | | | | | | |
| **VI. Evaluation of Proposal\*:** | | | | | | |
|  | | | Names of committee members\*\*: | | | |
|  | | | 1. Head of Discipline (Ex-officio): | |  | |
|  | | | 2. | |  | |
|  | | | 3. | |  | |
|  | | | 4. | |  | |
|  | | | \*Head of the concerned discipline will form a panel of 3 experts for the evaluation of the PRIUS proposal.  \*The supervisor and/or co-supervisor cannot be members of the evaluation committee. | | | |
|  | | | Recommendation: | | | |
|  | | | Signatures of the evaluation committee members | | | |
| Dean, Research & Development: | | | | | | |
| Director: | | | | | | |