

**GENERAL GUIDELINES/ INFORMATION**

1. The project would necessarily have to be developed jointly by the scientists/ researchers in India and at least 2 ASEAN MS, and duly forwarded by the Heads of the respective institutions.
2. The project team must comprise of a Project Investigator from India and Co-PI from at least 2 different ASEAN MS.
3. The maximum number of project participants from each country must be only two (preferably one senior and one junior researcher ie ph.d student/post-doc)
4. Only one visit per year from each participating country is permitted under this scheme to visit each participating country by Indian researchers where as ASEAN project participant to visit India. The duration of visits would be max 60 days per year for junior researchers and max of 21 days per year for Sr. Scientists/ researchers/ faculty. One visit is defined as a visit by a scientist/ expert to partner country.
5. Only one research proposal from one researcher / applicant shall be considered at a time.
6. No requests for extension (with or without additional cost) of the project beyond 3 years duration shall be considered.
7. Institute over-head charges shall be payable to Indian grantee Institutes @5% of the non-travel expenses/ costs which may change at the sole discretion of the funding parties.

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**(Application form for ASEAN-India Collaborative R&D proposal)  
ASEAN-INDIA SCIENCE & TECHHOLOGY DEVELOPMENT FUND**

**PART 1: General information****1 Basic data**

|                                       |  |
|---------------------------------------|--|
| <b><i>Project Title:</i></b>          |  |
| <b><i>Keywords:</i></b>               |  |
| <b><i>Priority research area:</i></b> |  |
| <b><i>Duration (months):</i></b>      |  |

**Lead Project Investigator (PI) -INDIA**

|                                |  |
|--------------------------------|--|
| Name (First name, Surname)     |  |
| Designation:                   |  |
| Academic degree:               |  |
| Date of birth:                 |  |
| Gender:                        |  |
| Nationality:                   |  |
| Institute name/ place of work: |  |

|                                       |  |
|---------------------------------------|--|
| Address:                              |  |
| E-mail:                               |  |
| Phone number including mobile number: |  |

**Other project partners (Indian side):**

**(Note: Other partners from Indian side must be from same Institute/ University as of Lead Indian PI)**

|                                       |  |
|---------------------------------------|--|
| Name (First name, Surname)            |  |
| Designation:                          |  |
| Academic degree:                      |  |
| Date of birth:                        |  |
| Gender:                               |  |
| Nationality:                          |  |
| Institute name/ place of work:        |  |
| Address:                              |  |
| E-mail:                               |  |
| Phone number including mobile number: |  |

(Please insert additional tables into the document to list additional co-investigators)

**Lead Project Investigator (PI) –ASEAN MS-1**

|                                |  |
|--------------------------------|--|
| Name (First Name, Family Name) |  |
| Designation:                   |  |
| Academic degree:               |  |
| Date of birth:                 |  |
| Gender:                        |  |
| Nationality:                   |  |
| Institute name/ place of work: |  |
| Address:                       |  |
| Postcode, city:                |  |
| E-mail:                        |  |
| Phone number:                  |  |

**Other project partners (ASEAN MS-1 side):**

**(Note: Other ASEAN MS-1 partner must be from Institute/University of Lead PI from ASEAN-MS1)**

|                                |  |
|--------------------------------|--|
| Surname, First Name            |  |
| Designation:                   |  |
| Academic degree:               |  |
| Date of birth:                 |  |
| Gender:                        |  |
| Nationality:                   |  |
| Institute name/ place of work: |  |
| Address:                       |  |
| Postcode, city:                |  |
| E-mail:                        |  |
| Phone number:                  |  |

**Lead Project Investigator (PI) –ASEAN MS-2**

|                                |  |
|--------------------------------|--|
| Name (First Name, Family Name) |  |
| Designation:                   |  |
| Academic degree:               |  |
| Date of birth:                 |  |
| Gender:                        |  |
| Nationality:                   |  |
| Institute name/ place of work: |  |
| Address:                       |  |
| Postcode, city:                |  |
| E-mail:                        |  |
| Phone number:                  |  |

**Other project partners (ASEAN MS-2 side):**

**(Note: Other ASEAN MS-2 partner must be from Institute/University of Lead PI from ASEAN-MS-2)**

|                                |  |
|--------------------------------|--|
| Surname, First Name            |  |
| Designation:                   |  |
| Academic degree:               |  |
| Date of birth:                 |  |
| Gender:                        |  |
| Nationality:                   |  |
| Institute name/ place of work: |  |
| Address:                       |  |
| Postcode, city:                |  |
| E-mail:                        |  |
| Phone number:                  |  |

(Please insert additional tables into the document to list additional co-investigators)

We hereby confirm that all the information given in this application and the attachments is correct to the best of my knowledge.

|                    |                                  |
|--------------------|----------------------------------|
| <i>Place, Date</i> | <i>INDIAN main applicant</i>     |
| <i>Place, Date</i> | <i>ASEAN MS-1 main applicant</i> |
| <i>Place, Date</i> | <i>ASEAN MS-2 main applicant</i> |

**INSTITUTIONS ENDORSEMENT:**

Certified that the necessary infrastructural facilities in connection with implementation of the above mentioned project is available in this Institution and all necessary administrative support will be extended for smooth implementation of the project

**Indian Institution:**

Name:

Position:

Signature:

Date

**ASEAN MS Institution-1:**

Name:

Position:

Signature:

Date:

**ASEAN MS Institution-2:**

Name:

Position:

Signature:

Date:

**PART-2: Scientific project description** (*Briefly describes the objectives, the research plan, and expected results of the proposed project*)

- i. Objectives**  
*(Describe in detail the objectives of the proposed project)*
- ii. Background** (max. 1 pages)  
*Describe the study interests with respect to knowledge in the field and open questions that motivate this proposal. Explain the significance of this project and describe how it will contribute to the advancement of knowledge in your field of research. State what will be original about the proposed project compared to what has already been published in your area of research.*
- iii. Partnership aspects**  
*Outline the previous work and past performance of all applicants in the proposed area of research. Briefly describe their experiences and strengths and show their complementarities.*
- iv. Detailed research plan including methodology**  
*Explain in detail your approach and methodology to conduct the proposed research and to obtain the stated objectives. Describe how the individual tasks and responsibilities will be divided between the project partners.*
- v. Summary** (max. one page)
- vi. List of on-going and/ or recent research projects with collaborators**

| <b>Project title</b> | <b>Research area</b> | <b>Project duration</b> (xx/yy/zz - xx/yy/zz) | <b>Amount of funds &amp; funding source</b> |
|----------------------|----------------------|---|---|
|                      |                      |   |   |

*(Insert additional rows into the table if required).*

**ATTACHMENTS**

In addition, please provide for all applicants:

- a. Brief curriculum vitae
- b. Publication list and list of patents (if applicable)

**PART 3: Requested funding:**

**3.1 Mobility: (Indian side: From India to ASEAN MS-1) – Only one visit per year from each participant is permitted**

| Year            | No. and duration of each visit to ASEAN MS | International air-fare, visa fee, overseas insurance (only in INR for Visits from India to ASEAN MS-1) | Accommodation, per-diem etc. in INR. (For visits from India to ASEAN MS-1) as per the prescribed rates | Total |
|-----------------|--|--|--|-------|
| 1 <sup>st</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |
| 2 <sup>nd</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |
| 3 <sup>rd</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |

\*Please indicate Institutes Guest house accommodation charges per day.

**3.2 Mobility: (Indian side: From India to ASEAN MS-2) – Only one visit per year from each participant is permitted**

| Year            | No. and duration of each visit to ASEAN MS-2 | International air-fare, visa fee, overseas insurance (only in INR for Visits from India to ASEAN MS 2) | Accommodation, per-diem etc. in INR. (For visits from India to ASEAN MS 2) as per the prescribed rates | Total |
|-----------------|--|--|--|-------|
| 1 <sup>st</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |
| 2 <sup>nd</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |
| 3 <sup>rd</sup> | i.   |  |  |       |
|                 | ii.  |  |  |       |

\*Please indicate Institutes Guest house accommodation charges per day.

**2.3 Indian side (project research costs in INR)**

| Year            | Accessories/ appliances etc. | Chemicals & Consumables | Project scientific manpower (only project Asstt. / JRF/ SRF/ RA) as per DST norms | Total |
|-----------------|------------------------------|-------------------------|---|-------|
| 1 <sup>st</sup> |                              |                         |   |       |
| 2 <sup>nd</sup> |                              |                         |   |       |
| 3 <sup>rd</sup> |                              |                         |   |       |

\*Please indicate / mention name and cost of accessories/appliances being requested for.

\*Please indicate rate and quantity of chemicals & consumables asked for.

### **3.4 Mobility expenses (visits from ASEAN MS-1 to India)**

| <b>Year</b>           | <b>No. and duration of each visit to India</b> | <b>International air-fare and overseas insurance only in INR for visits from ASEAN MS-1 to India</b> | <b>Accommodation, per-diem etc. in ASEAN MS-1 for visits from ASEAN MS-1 to India</b> | <b>Total</b> |
|-----------------------|--|--|---|--------------|
| <b>1<sup>st</sup></b> | i.   |  |   |              |
|                       | ii.  |  |   |              |
| <b>2<sup>nd</sup></b> | i.   |  |   |              |
|                       | ii.  |  |   |              |
| <b>3<sup>rd</sup></b> | i.   |  |   |              |
|                       | ii.  |  |   |              |

### **3.5 Mobility expenses (visits from ASEAN MS-2 to India )**

| <b>Year</b>           | <b>No. and duration of each visit to India</b> | <b>International air-fare and overseas insurance (only in INR) for visits from ASEAN MS-2 to India</b> | <b>Accommodation, per-diem etc. for visits from AMS-2 to India (in INR only)</b> | <b>Total</b> |
|-----------------------|--|--|--|--------------|
| <b>1<sup>st</sup></b> | i.   |  |  |              |
|                       | ii.  |  |  |              |
| <b>2<sup>nd</sup></b> | i.   |  |  |              |
|                       | ii.  |  |  |              |
| <b>3<sup>rd</sup></b> | i.   |  |  |              |
|                       | ii.  |  |  |              |

### **PART 4: Research requiring authorizations or notifications**

Indicate whether the proposed research includes:

|   | <b>YES</b> | <b>NO</b> |
|---|------------|-----------|
| Humans, human tissue samples or individual medical data |            |           |
| Vertebrates, decapods or cephalopods                    |            |           |
| Pathogens or genetically modified organisms             |            |           |
| Human embryonic stem cells                              |            |           |

Please note that research on humans, human embryonic stem cells, vertebrates, decapods, cephalopods, pathogens and genetically modified organisms needs authorization and/or notification.

**PART-5 (For Indian partners only)**

1. List of on-going research projects with the Indian PI:

| Title of the project | Brief description | Duration with dates of commencement and completion of the project | Funding available and source of funds |
|----------------------|-------------------|---|---------------------------------------|
|                      |                   |   |                                       |
|                      |                   |   |                                       |
|                      |                   |   |                                       |

2. Infrastructure available/required to implement the project:

| Facilities                    | List of items required for the project | If not available presently, how it is proposed to be procured/recruited. Please indicate the source of funding |
|-------------------------------|--|--|
| Equipment                     |  |  |
| Manpower                      |  |  |
| Consumables and Contingencies |  |  |

3. Certified that the following Indian scientists SRF/JRF, Post-Docs are presently affiliated with the University/ Institute and will be the official project participants for the entire duration of the project:

| S.No. | Name of the project participant | Position held | From | To |
|-------|---------------------------------|---------------|------|----|
| 1.    |                                 |               |      |    |
| 2.    |                                 |               |      |    |
| 3.    |                                 |               |      |    |

4. Please mention Name/Address/Contact details including email address/ area of specialization of 3 possible peer-reviewers of the project proposal.

| S.No. | Name and address of the expert | Contact details including email ID | Area of expertise / keywords |
|-------|--------------------------------|------------------------------------|------------------------------|
|       |                                |                                    |                              |

5. Bank Account details of Indian lead Institute for transfer of funds:

| S.No | Item(s)        |  |
|------|----------------|--|
| 1.   | Account Name   |  |
| 2.   | Account Number |  |



|    |                                      |  |
|----|--------------------------------------|--|
| 3. | Name, Branch and Address of the Bank |  |
| 4. | IFSC Code of the Bank                |  |
| 5. | Micr Code                            |  |