**Application to obtain Research allowance as per the Management**

**Services Circular No. 02/ 2014**

1. **RESEARCH IDENTIFICATION**
2. Title of the Research :
3. Duration of the Research project (in months) :
4. Research field covered by the proposal :
5. Researchers:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Researcher 1****(Principal Researcher)** | **Researcher 2** | **Researcher 3** |
| Name  |  |  |  |
| Designation  |  |  |  |
| Official Address  |  |  |  |
| Telephone No.  |  |  |  |
| Fax No.  |  |  |  |
| e-mail  |  |  |  |

1. **TECHNICAL INFORMATION**
2. Objectives of the Research (Not more than 200 Words)
3. Introduction and Justification of the Research (Not more than 300 Words)
4. Literature Review and Scope of the research (Not more than 200 Words).
5. Methodology of the Research (Not more than 200 words),
6. Expected results of the research
7. Expected Nationally significant output of the Research
8. Are any of the expected outcomes likely to have commercial value? (Not more than 100 words)
9. Infrastructure facilities related to the research activity, available in the institutions where the research work would be carried out.
10. Justification for collaboration (if applicable)
11. Action Plan in the form of Gantt chart monthly basis (to be attached)

1. **ADMINISTRATIVE & FINANCIAL INFORMATION**
2. a) Funding Source for the Research (Please attached relevant documents)

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………..………..

b) Research Cost

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Year** | **Manpower (Research fellows/ Assistance etc.) (LKR)** | **Equipment & Consumables****(LKR)** | **Field Visits (LKR)** | **Total (LKR)** |
| 1st Year  |  |  |  |  |
| 2nd Year  |  |  |  |  |
| 3rd Year  |  |  |  |  |
| Total |  |  |  |  |

1. Information on research projects for which the Research Allowance is/ was paid.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Title of the Research with Ref. No. (if available)** | **Institution in which Research is/ was conducted** | **Date of commencement** | **Date of (expected) Completion** | **Present Status of the Research** | **Period for which the Research allowances has/ had been paid** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

(Please attached relevant documents)

**d)**  **Declaration and Recommendation**

1. Declaration of the of the Researcher/s

I/We the undersigned hereby submit this application an confirm that this research is not for the purpose of Personal Qualification up-liftment, Promotional requirements and/ or Efficiency Bar requirement

And

All information provided herein are true and accurate to the best of my/our knowledge and I/we further confirm that I/we understand that if any of the information I/we have provided are found to be false, incorrect or misleading, it renders me/us ineligible for obtaining the research allowance and is/ are subjected to any disciplinary and /or criminal procedure.

Name of Applicants Signature Date

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1. Declaration of collaborating Institution/s (if any)

|  |  |
| --- | --- |
| Name and address of the Institution  |  |
| Contact person and designation |  |
| Telephone No.  |  |
| Fax No.  |  |
| E-mail  |  |

(Concurrence / Approval of the collaborating institutions should be attached)

This is to confirm that I have reviewed the above application and would make arrangements to provide required resources & facilities for successful completion of the Research Project within the specified period.

…………………………………………………….. ……………………………………………...

Head of the Organization (seal) Signature and date

1. **Declaration of the Head of the Organization (Should be filled in relation to each applicant separately)**
2. Name of the Researcher …………………………………………………………………………………………………………………..
3. Designation ………………………………………………..……………………………………………………………………………………..
4. Title of the Research …………………..……………………………………..……………………………………………………………..
5. Is the researcher currently engaged in any other Research project for which the Research allowance is being paid? Yes / No
6. Has the researcher been engaged previously in any other research project for which the research allowance was paid? Yes /No
7. If answer to (v) is “Yes” –
8. State the title of the research project/s ……………………………………………………………………………….…………….
9. Is the above research project completed satisfactorily / unsatisfactorily or premature terminated? ……………………………………………………………………………………………………………………………………..…………………………..
10. Name of institution which paid the allowance ………………………………………………………………………………………….
11. The duration for which the allowance has been paid **from**………………………………**to**………..…………………………
12. If answer to (vi) (b) is unsatisfactorily or premature terminated –
13. Date on which research project was terminated………………………………………………………………..………………………
14. Reasons for premature termination of the research project: ……………………………………………………………………………………………………………………………………..……………………………

……………………………………………………………………………………………………………………………………………………..……………

1. Is the above research in line with government policies and hence contributes to the development of the country? Yes/ No
2. Is the research proposal in alignment with a national priority area? Yes/ No
3. Would the infrastructure and/ or necessary facilities required to successfully conduct this research be provided by the institution? Yes/no
4. Does the institution agree to undertake financial and other management responsibilities for the research work to be carried out at the institution? Yes/no
5. Would the institute provide human resources, equipment and consumables required for this research? Yes/no
6. Would the institute consider implementation of the outcome of the Research? Yes/No
7. I certify that –
8. The applicant is an officer in the category referred to in paragraph 03 of the Management Circular No. 02/2014 and is there by entitled to apply for the research allowance.
9. The research to be carried out by the applicant researcher would not impede the duties of his /her permeant position.
10. The subject matter of this research does not falls within the scope of a completed or ongoing research activity of the institution.
11. The funding to conduct this research has been made available/ committed to this institution from dd/mm/yy……………………………………………….

In accordance with the above factual information and my personal knowledge I do here by certify and recommend/ do not recommend to grant approval to pay Research Allowances as per the Management Circular No. 2/2014 to Prof. / Dr. / Mr. / Mrs. / Ms. …………………………………………………………….. with the effect from ……………………………………………

…………………………………………………….. ……………………………………………...

**Head of the Organization Signature and date**

**(seal)**