**PROGRESS REPORT**

**Progress Report-Number: ………………………………………………………………………..**

Grant Number: ……………………………………………………………………………………..

Period Covered: From ………………………… To ………………………………………….

**PART A**

**General information**

1. Title of the project:
2. Executive summary of the project:
3. Principal investigator: (Rev./Prof./Dr/Mr./Ms.):
4. Co-investigators:
5. Date of award:
6. Date of commencement of the project :
7. Faculty and the Department where research is being carried out:
8. Number of research students/assistants employed (indicate where the research student has Registered for a post graduate degree)
	1. Name of the research student:
	2. Registered for postgraduate degree: YES/ NO
	3. Specify the degree:
	4. Date of registration:
	5. Registration number:
9. Number of technical assistants/ labourers employed:

**PART B**

**Details of the Project**

1. Objectives of the project :
2. Objectives achieved to date :
3. Description of research carried out during the reporting period :
4. Results/ Observations/ Outputs (in detail):
5. Gantt chart for work done

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Activity |  | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| 1 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 | Planed |  |  |  |  |  |  |  |  |  |  |  |  |
| Progress |  |  |  |  |  |  |  |  |  |  |  |  |

1. Are there any deviations in the work plan when compared to the original?

Yes/No

 If yes give reasons:

b. Did you obtain prior approval from the Research Council for the deviations:

 Yes/No

 If not why:

**PART C**

**Project Expenditure**

1. **Is the work on schedule? If not give reasons:**
2. **List major items of equipment purchased during the reporting period**

|  |  |  |  |
| --- | --- | --- | --- |
| Item/Description | Date purchased | Value |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Expenditure incurred for the reporting period (Rs.): i.e. grantee’s estimate**

*(Please provide the Financial Statement issued by the Bursar/ Accountant of the Institution as well)*

|  |  |
| --- | --- |
| Personal |  |
| Equipment |  |
| Consumables |  |
| Lab services and sample analysis |  |
| Statistical analysis |  |
| Calibration of instruments |  |
| Post-Graduate Registration Fee |  |
| Travel and subsistence |  |
| Miscellaneous |  |

1. **Utilization of Funds**

|  |  |  |  |
| --- | --- | --- | --- |
| Vote | Total Allocation (Rs.) | Total amount spent to date (Rs.) | Percentage spent out of total allocation |
| Personal:  |  |  |  |
| Equipment: |  |  |  |
| Consumable: |  |  |  |
|  Lab services & sample analysis: |  |  |  |
|  Statistical analysis: |  |  |  |
|  Calibration of instruments: |  |  |  |
|  Postgraduate registration fee: |  |  |  |
|  Travel and Subsistence: |  |  |  |
| Miscellaneous : |  |  |  |

1. **Comments regarding project implementation, if any**
2. **Submit a brief work plan for the next 06 months:**
3. **Give projected expenditure for the next 6 months (Rs.): Grantee’s estimate**

|  |  |
| --- | --- |
| Personal |  |
| Equipment |  |
| Consumables |  |
| Lab services and sample analysis |  |
| Statistical analysis |  |
| Calibration of instruments |  |
| Post-Graduate Registration Fee |  |
| Travel and subsistence |  |
| Miscellaneous |  |

**PART D**

* 1. Publications/Communications arising from the project during the reporting period (Please provide evidence).

**PART E**

I hereby declare the information provided above is correct to the best of my knowledge.

**…………………………....... …...……………………**

 Principal Investigator Co- Investigator/s

Comments and recommendation of the Research Committee of the Faculty

Signature of the Chairperson/ Research Committee Date

Comments of the Dean of the Faculty

Signature of the Dean of the Faculty Date