

APPLICATION FOR PROJECT/IDEA GUIDANCE

1. Applicant's Name (Project head) :

2. Applicant's Department/Year :

3. Name of the Mentor :

4. Department of the Mentor :

5. Name of the team members

| Sl. No. | Name | Department | Sem/Year |
|---------|------|------------|----------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

6. List the technical expertise/role played by team members in the broader scope of the project/Idea proposed

| Sl. No. | Name | Department | Sem/Year | Expertise/Role |
|---------|------|------------|----------|----------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

7. Mention the academic score of each of the team members

| Sl. No. | Name | Dept. | Sem/Year | CGPA | Arrears, if any |
|---------|------|-------|----------|------|-----------------|
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

8. Name of the Project/Idea :

9. Application aimed through the Project/Idea :

10. Technology on which the Project/Idea is proposed :

11. Discipline under which the Project/Idea is categorized :

12. Scope for Inter-Disciplinary areas of the Project/Idea Proposed : Y/N

13. If yes, list the other Disciplines that are involved in the Proposed Project/Idea

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

14. List the skills that are required and that are available in the College Curriculum

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

15. List the additional skills that are to be added for the Project/Idea

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

16. List the guidance you seek from the College for the proposed Project/Idea

| Sl. No. | Lab facility | Department | Mentor |
|---------|--------------|------------|--------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

17. Whether the Project/Idea requires guidance from any external agency if any: Y/N

18. If yes, list the Industry/Professional that is sought for guidance

| Sl. No. | Industry | Guidance | Scope | Remarks |
|---------|----------|----------|-------|---------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |

19. Give the tentative timeline for the completion of the Project/Idea

1. Less than a month
2. Less than three months
3. Three months to Six months
4. More than Six months

20. Is the Project/Idea cited in the list of the funded projects from any Government agencies: Y/N

21. If yes, list the Government agency involved and the funding proposed

| Sl. No. | Government Agency | Funding | Relevant link |
|---------|-------------------|---------|---------------|
| 1. | | | |

22. Is the Project/Idea cited in the list of funded projects from any non-government agencies: Y/N

23. If yes, list the non-government agency involved and the funding proposed

| Sl. No. | Non-government Agency | Funding | Relevant link |
|---------|-----------------------|---------|---------------|
| 1. | | | |

24. Is the Project/Idea, a part of any State/National/International Level competitions: Y/N

25. If yes, list the competition name

| Sl. No. | Competition | Agency involved | Relevant link |
|---------|-------------|-----------------|---------------|
| 1. | | | |

26. Whether the Project/Idea has Societal Benefit : Y/N

27. If yes list the positive impact, the Project/Idea has on the Society

| Sl. No. | Area focussed on the project | Section of the Society benefitted |
|---------|------------------------------|-----------------------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |

28. Whether the environmental impact of the Project/Idea been studied: Y/N

29. If yes list the environmental impact, the Project/Idea has on the Society

| Sl. No. | Area focussed on the project | Environmental Impact |
|---------|------------------------------|----------------------|
| 1. | | |
| 2. | | |
| 3. | | |

30. Scope of the Project/Idea getting converted to an Entrepreneurship venture?

31. List the facilities that are required for your team to convert your Project/Idea into an Entrepreneurship venture.

- 1.
- 2.
- 3.

Declaration

I, hereby, declare that the above-said information is true to my knowledge and belief.

Signature
Mentor

Signature
Project Leader

For Office Use

Project Approval Status : Approved/Disapproved

Remarks :

Signature
IIC Committee

Signature
HOD
Applicant's Department

Signature
Principal
MSEC

Signature
Secretary
MSEC