NATIONAL AIDS CONTROL ORGANISATION

(Monitoring, Evaluation and Research Division)

APPLICATION FORM FOR NACO-RESEARCH FELLOWSHIP SCHEME

Adequate information must be furnished in a brief but self-contained manner to enable the Committee to assess the project.

SECTION 1: DETAILS OF APPLICANT

NAME of APPLICANT: Mr/Mrs/Miss/Ms/Dr	
Date of Birth	
Educational Details	
Degree Applicable (MD/M.Phil/PhD)	
Name of the Institute/University where registered	
Date of Registration	
Whether Institute is the member of Network of Indian Institution for HIV/AIDS Research (NIIHAR)	YES/NO
If yes Quote ID No	
Principal Investigator (Name, Designation, Organization, Contact details)	
Co-Investigators (Name, Designation, Organization, Contact details)	
Institution/Organization where applicant registered/employed and full address	
Complete Postal Address for further Communication	

Please attach detailed Curriculum Vitae of all Investigators (with subject specific publication limited to previous 5 years)

SECTION 2: PROJECT DETAILS (should not exceed 5 printed pages)

1. TITLE OF PROJECT	Ր in full	
(do not abbreviate)		
2.Type of Study:	Riomedical	& Clinical Research=1
2.1 ype of Study.		ce Research=2
		gical Study=3
	Policy Mana	gement Study=4
3. Status of Review:		
4. Description of the prop	osal – Introduction	n, aim(s) and objectives, justification for study.
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5. Application of the work	in the context of	priorities of NACP III
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6. Detailed research plan	n. (Give here the	e design of study, indicating the total number of
		lection of subjects, equipments and other materials to
		ployed for evaluating the results including statistical
methods etc.)	iniques to be em	project for evaluating the results mercaning statistical
methods etc.)		
ATTACH CEDADATE C	HIBETS	
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6. Present knowledge and	relevant bibliogra	phy including full titles of articles relating to the
project.		
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7. Proposed budge	et:
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Budget items	Amount requested in INR
Total	

6. Facilities in terms of equipment, etc, available at the Institutions/Organizations for the proposed investigation.

7. Declaration and attestation:

I certify that all the details declared here are correct and complete.

Signature of Applicant

Countersignature of Guide Place:

Date:

Certificate of the Heads of the Department and Institution

(Official Letter Head duly signed and stamped by the Head of the Institutions)

I have read the terms and conditions of the NACO Research Fellowship Scheme.

- 1. The necessary institutional facilities are available and will be provided for the implementation of this research proposal being submitted to the NACO for funding. Full account of expenditure will be rendered by the Institution.
- 2. I shall from time to time disclose fully to the NACO or as the NACO may direct, the progress of any investigations undertaken by me while in receipt of such assistance as aforesaid (hereinafter referred to as the said Investigation).
- 3. And if at any time during the course of such assistance or after the termination of receipt of such assistance as aforesaid, I shall make any invention arising out of or in connection with the said Investigation, I shall hold the same in trust on behalf of the NACO and we shall forthwith disclose to the said NACO or as the NACO may direct a full and complete description of the nature of the said invention and the mode of performing the same.
- 4. The said investigation and all improvements thereon discovered or invented by me during the course of receipt of such assistance or after the termination of such assistance as aforesaid shall subject to such reservations (if any) in respect of the said invention of the proceeds thereof for my benefit as the NACO may in absolute discretion permit.
- 5. I shall be responsible to complete the work as per given timeline in the application form.
- 6. I hereby undertake to abide by the current Terms and Conditions for NACO-Research Fellowships Scheme.

Name of the head of the department	Name of the head of the Institution
Signature with date	Signature with date
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