



**TRIBHUVAN UNIVERSITY**  
**Prithvi Narayan Campus**  
**Bagar, Pokhara**

ATTACH  
A  
PP SIZE PHOTO  
of Principal  
Researcher

**CENTRE FOR RESEARCH AND INNOVATION (CRI)**

**Community-Based Research Project-2021**  
**APPLICATION FORM**

You are applying for	Mini Research Grant (Individual)	Code No.:
	Mini Research Grant (Group)	
	Community-Based Research Project	

**1) Personal Information (of the Principal Researcher only):**

Name :	Gender : Male/Female/Other .....	Date of Birth:
Permanent Address:	Mailing Address:	Phone: Email:

**2) Current Employment Record (of the Principal Researcher only):**

Faculty/Institute:	Department:
Job Start Date:	Current Designation:

**3) Information about the Proposed Study**

Title of the Study:		
Subject:	Specialization:	Period of Study:
<b>Co-Researcher 1 (full time or part time faculty):</b> Name: Department: Designation: Phone: Email:	<b>Co-Researcher 2 (full time or part time faculty):</b> Name: Department: Designation: Phone: Email:	

<b>Co-Researcher 3 (inclusive representation):</b> Name: Department: Designation: Phone: Email:	<b>Co-Researcher 4 (relevant field outside the campus):</b> Name: Department: Designation: Phone: Email:
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**4) List of the Undergoing UGC or TU and Other Research Grants/Fellowships (of the Principal Researcher or Researcher only)**

Title of the Study	Funding Agency	Start Date	Study Period
1			
2			
3			

**5) Documents Checklist (Mark in the box if included)**

1	Duly filled in application form	
2	Concept Note (less than 2-3 pages with 12 point font and single line space)	
3	CV of all applicants (less than 3 pages of each CV)	
4	Receipt of application processing charge	

**6) Undertaking by the Applicant (Principal Researcher only)**

I hereby confirm that the information provided by me is true and agree to accept any decision taken by the **Centre for Research and Innovation** under Prithvi Narayan Campus, Pokhara.

Signature: .....

Date: .....

**7) Recommendation (Head of the Institution i.e. Assistant Campus Chief of the relevant area)**

I hereby certify that statements made above by the candidate/s have been verified and found true.

Signature: .....

Name: .....

Designation: .....

Department: .....

Date: .....

