



MADHYA PRADESH STATE BIODIVERSITY BOARD

Format for Minor Research and Documentation Projects

A. Project Summary

1	Title of the Project	
2	Project Duration	
3	Project Cost	
4	Executing Agency	
5	Principal Investigator	
	1. Name	
	2. Designation	
	3. Qualification	
	4. Address	
	I. Office	
	II. Residence	
	5. E-mail Address	

B. Detailed Proposal

1	Background	
2	Rationale of the Study (Please also specify how the project is different from and / or builds on projects of similar nature)	
3	Review of Literature	

4	Study Objectives	
5	Project Area or Target Group.	
6	Methodology (i) Research Design (ii) Sampling (iii) Research tools/instruments (Questionnaire, Schedule, research plots etc.)	
7	Research Plan (i) Research Activities (Corresponding to each of the research objectives) (ii) Time plan (for executing the activities)	
8	Financial Assistance Sought <i>(give headwise detail)</i> Professional costs (Personnel/ manpower costs e.g. Research Assistants etc) Field costs (Costs incurred for undertaking field work) Capital Costs (for equipments etc.) Administrative support (Please give details along with basis of costing) Note: Capital cost should not be more than 10% of the project cost	
8	Project Output/outcomes (What the study will result into)	
9	Deliverables (What all will be submitted to the Board e.g. Mid-term reports, Completion report, poster photos etc.)	
10	How the project will help MPSBB to achieve its goals	

	1. Conservation of Biodiversity 2. Sustainable use of Biodiversity 3. Benefit sharing arising out of commercial use of bioresources (ABS)	
11	Bank Details for Transaction	
	i. Name of Bank	
	ii. Account Holder's Name	
	iii. Account Number	
	iv. Address of Bank	
	v. IFSC Code	

Declaration

1. I / We shall abide by the rules governing the project in case assistance is provided to me/us from M.P.S.B.B for the above project
2. I/ We shall complete the project within stipulated period. If I/we fail to do so and if Board is not satisfied with progress of research/ documentation project Board may terminate the project and ask for refund of amount received by me/us.
3. The above research project is not funded by any other agency.
4. Full audited Utilization Certificate will be submitted at the end.

Place:

Date:

**Name and Signature
Principal Investigator
(With Seal)**