Dr. Anirudh P. Singh

Dean Research, Innovation & Consultancy



Ref. No. IKGPTU/ R&D 217

Dated 02 02 17

To

The Principal/Director/Faculty/Students, All IKGPTU Affiliated Engineering College.

Subject: Application for Industry Defined Projects (January-June 2017).

Dear Sir/Madam,

We are inviting applications for Industry Defined Projects (IDP). Projects will be submitted in the department of R&D, IKGPTU. Last date of submission of projects is February 17, 2017 till 5:00 pm.

Project endorsed by training centers/academies/shops instead of an Industry will not be accepted.

You are requested to circulate it among your faculty and place on notice boards for information. The format of project is attached herewith.

For any query, kindly contact us on mail id coordinatorip.ptu@gmail.com

With regards,

Anirudh P. Singh

CC: SVC for kind information please

"Developing Youth for a prosperous Knowledge Society"

Website: www.ptu.ac.in E-mail: deanricptu@gmail.com, deanric@ptu.ac.in

I.K.G.PUNJAB TECHNICAL UNIVERSITY, JALNDHAR

JALANDHAR-KAPURTHALA HIGHWAY, KAPURTHALA-144603

Phone: 01822-662569

E-mail: coordinatorip.ptu@gmail.com Website: www.ptu.ac.in

DEPARTMENT OF RESEARCH & DEVELOPMENT

INDUSTRY DEFINED PROJECT (IDP) STATEMENT FORM ENCLOSURES

P	ease	che	٠ŀ	for

- 1. Endorsement by the Principal/Director of the college
- 2. Endorsement by the industry
- 3. Duly filled Performa
- 4. Resume of Principal Investigator (PI)

Date:

PUNJAB TECHNICAL UNIVERSITY, JALANDHAR

DEPARTMENT OF RESEARCH & DEVELOPMNET.

Jalandhar-Kapurthala Highway, Kapurthala-144603

INDUSTRY DEFINED PROJECT (IDP) FORM

For office use only		
Registration No.:	Date:	
Session:		
	STUDENTS' PARTICULARS	
I		
FIRST NAME		
LAST NAME		
MOBILE NO.	1. 2.	
EMAIL		
COLLEGE NAME		
ADDRESS		
BRANCH		
SEMESTER	YEAR	
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STUDENT		
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COLLEGE NAME	
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ROLL NO. SIGNATURE OF	
STUDENT	

BIO-DATA OF PRINCIPAL INVESTIGATOR/CO-INVESTIGATOR/CONSULTANT

1.	NAME:
2.	DATE OF BIRTH:
3.	DESIGNATION:
4.	NAME OF THE INSTITUTE:
5.	DATE OF JOINING:
6.	TOTAL EXPERIENCE:
7.	YEAR OF Ph.D AWARDED:
8.	YEAR OF POSTGRADUATION PASSED: (M.TECH/M.Sc/MCA/M.ARCH/MBA/MPHARMA)
9.	YEAR OF GRADUATION PASSED (B.Tech/B.Sc/B.Pharma/BCA/B.Arch)
10.	PERMANENT ADDRESS:
11.	ADDRESS FOR CORRESEPONDENCE:
12.	E-MAIL ID:
13.	
	PHONE NO. (OFFICE):
14.	PHONE NO. (OFFICE): MOBILE NO.:
15.	MOBILE NO.:
15. 16.	MOBILE NO.: HIGHEST DEGREE:
15. 16. 17.	MOBILE NO.: HIGHEST DEGREE: MAJOR FIELD:
15. 16. 17. 18.	MOBILE NO.: HIGHEST DEGREE: MAJOR FIELD: SPECIALIZATION:
15. 16. 17. 18.	MOBILE NO.: HIGHEST DEGREE: MAJOR FIELD: SPECIALIZATION: TEACHING EXPERIENCE:

~ 37	37 0.7 3			
Sr.No.	Name of the Project	Funding	Amount	Outcomes
DI .11U.	manic of the froject	runung	Amount	Outcomes

		Agency		
22. D	ISSERTATION COMPLETI	ED:		
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	ch/PhD/ Any oth	er
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	ech/PhD/ Any other	er
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	cch/PhD/ Any other	er
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	ech/PhD/ Any other	er
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	ch/PhD/ Any oth	er
Sr.No.	Name of the Dissertation	B.Tech/ M.Te	ch/PhD/ Any oth	er

- 23. NO. OF STUDENTS REGISTERED:
 - (i) AS A SUPERVISOR:
 - (ii) AS A CO-SUPERVISOR:
 - (iii) NUMBER OF VACANT POSITION AVILABLE FOR Ph.D.:
- **24. PATENTS:**

25. PAPERS IN JOURNALS (Published in Peer Reviewed Journal)

26. CONFERENCE ATTENDED:

27. PAPERS IN CONFERENCE: Signature of the Principal Investigator (Co-Investigator)

INDUSTRY PARTICULARS FOR IDP/ CONSULTANT

	INDUSTRY		
NAME OF THE INDUSTRY			
COORDINATOR			
CONTACT ADDRESS			
MOBILE NO.			
EMAIL			
NAME OF THE INDUSTRY			
TYPE OF INDUSTRY			
REGD No.			
ADDRESS OF THE			
INDUSTRY			
NAME OF INDUSTRIAL	OFFICE	MOBILE	
ESTATE			
CONTACT NO.			
COMPANY LOGO			
WEBSITE			
E-MAIL (FOR			
CORRESEPONDENCE)			

INDUSTRY DEFINED PROJECT STATEMENT FORM TITLE OF PROJECT

1.	Project Title:			
	Discipline:			
	Name of the Guide:			
	Institution:			
5.	Project Summary (maximum 150 v	vords)		
_	(i) Key Words (maximum 6)			
6.	Technical details			
	(i) Introduction (under following	ng heads)		
	(ii) Origin of proposal			
	(iii) Definition of the problem			
7	(iv) Objective Literature Review			
	Patent details (if any)	t in the context of the current status		
	Work Plan	t in the context of the current status		
10.	(i) Methodology			
	(ii) Organization of wok elemen	te		
	` /	utilization of research outcome expected		
	from the project	utilization of research outcome expected		
11.	Budget			
Ī	ITEM	AMOUNT (Rs)		
	Non-Recurring			
	Recurring			
	Travel			
	Contingency			
	Total			
_				
(Signa	ture of the Student)			
1.				
2.				
3.				
4.				
5.				
Signat	ure of the Principal Investigator			
	ure of the Head of the Institute Office Seal)			

2.

3.

5.

ENDORSEMENT BY INDUSTRY COORDINATOR

The proposal titled	is
Industry Defined Project of	(Name of Industry).
Address	
The project work would be done under my supervision.	
gnature of the Coordinator of Industry	
ıte:	

ENDORSEMENT BY PRINCIPAL OF THE INSTITUTE

This is to certify that Dr/Mr/Mrs, the Principal Investigator
in the project entitled will
assume full responsibility for implementing the project. The institute will provide basic
infrastructure and other required facilities to the investigator for undertaking the research
project.
Signature of the Principal of the college
(With Office Seal)
Date:

PROJECT COMPLETION REPORT (PCR) FORMAT

Details of Research Projects being implemented/ completed/ submitted by the Investigator(s)/Co-Investigators Name & Institute:
Project Title:
Project Status:
Completed-duration: Period from to
Amount Released:
Date of start:
Total cost incurred:
Summary of the project:
Major Results/ Highlights of the project including achievement (publications, patents etc.) for completed projects
(Signature of the Student)
1.
2.
3.
4.
5.
Signature of the Principal Investigator
Signature of the Head of the Institute (With Office Seal)