



**KERALA STATE COUNCIL FOR SCIENCE, TECHNOLOGY &
ENVIRONMENT**

APPLICATION FORMAT

Financial Assistance for School Student Projects under SPYTiS-I

[To be submitted in 3 copies]

(All fields are mandatory. Incomplete applications will be rejected. Attach additional sheet wherever necessary)

1. Name(s) of Student Investigator(s):
 - a. Class/ Standard :
 - b. Address of the school :
 - c. Category of the school (Govt./Aided/Private):
 - d. Residential address with telephone number & email :
2. Title of the project proposal :
3. Achievement(s) of the student(s) in science related activities :
4. Name of Teacher supervisor :
5. Objectives of the project:
6. A brief description about the project (max. 300 words) *(attach a separate sheet if necessary)*:
7. Relevance of the project *(attach a separate sheet if necessary)*:
8. Time required to complete the project:
9. Whether assistance from any external agency/ institution is required to complete the project:
 - a. If yes, give details :
10. Estimate showing the expenditure involved in the project *(attach a separate sheet if necessary)*:

| Sl No. | Budget Head | Amount (Rs.) |
|---------------|--|---------------------|
| 1. | Consumables (Chemicals, glassware etc.) | |
| 2. | Travel expense | |
| 3. | Contingency (Stationary and similar items) | |
| 4. | Others, if any | |
| 5. | Total | |

ENDORSEMENT

I have scrutinized the project proposal titled “.....”
.....” and found that the project is feasible and can be completed by the student(s) in the stipulated time frame and that I shall provide all the guidance and support needed for the successful completion of the project.

Place:
Date:

Signature of the Teacher Supervisor

Name, Official Address, Phone No.
(Land/Mobile)& e-mail:

Declaration by Head of the Institution

I hereby certify that all the details furnished above are true and correct to the best of my knowledge and declare that the amount sanctioned will be utilized exclusively for the successful completion of the project. On completion of the project, a copy of the project report, certified Statement of Expenditure (SE) and Utilization Certificate (UC) in the format prescribed by the Council shall be submitted to KSCSTE at the earliest.

Place:
Date:

Signature of the Head of the Institution

Name, Official Address, Phone No.

(Land/Mobile)& e-mail:

(Office Seal)