

Government of the People's Republic of Bangladesh
Ministry of Cultural Affairs
Bangladesh Secretariat, Dhaka

**Primary Information Form
(Research Grant Application Form)**

PART- 1: GENERAL INFORMATION

1. Name and address of the contracting institute:
 - i. Name of the contracting institute:
 - ii. Mailing address:
 - iii. Tel no:
 - iv. Mobile no:
 - v. Fax:
 - vi. E-mail:
2. Area/department where research is to be performed:
3. Title of the proposed project:
 - i. Name of coordinated research programme (if applicable):
 - ii. Name and designation of the authority of the organization/institution/university forwarding the research contract proposal:
 - iii. Area of research:
4. Duration:
5. Total cost:

PART- II: INFORMATION ABOUT PROJECT PERSONNEL

1. Principal investigator:

1. Name:
2. Gender:
3. Date of birth & age:
4. Permanent address:
5. Contact address:
6. E-mail:
7. Contact number:
8. Academic degrees:

Subject	Name of degree	Institution & Year of passing	Secured grade/class/ division
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9. Job title/ designation:
10. Experience (attached evidences):
11. Publications:

2. Associate investigator:

1. Name:
2. Gender:

3. Date of birth & age:
4. Permanent address:
5. Contact address:
6. E-mail:
7. Contact number:
8. Academic degrees:

Subject	Name of degree	Institution & Year of passing	Secured grade/class/ division
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9. Job title/ designation:
10. Experience (attached evidences):
11. Publications:

PART- III: TECHNICAL INFORMATION

1. Cultural background of the project:
 - a. Significance of the proposed research:
 - b. Related work already performed or in progress at the contracting institution/ organization:
 - c. Related work already performed or in progress at other institution in the country (if known):
 - d. Reference to important related literature relevant to the project (including own publication):
2. Cultural scope of the project:
 - a. Research objectives:
 - b. Relationship of these objectives to the present state of knowledge in the field:
3. Research plan including proposed methods or techniques is going to be used:
4. Time schedule of activities with milestones:
5. How is the Project related to the state objective of the special allocation for culture and heritage affair of Bangladesh?
6. How is the programme related to academic degree programme (if applicable)?
7. What outputs from the project can be considered for the assessment of its success?
8. How does the project contribute in the development of sustainable culture and heritage?
9. List of facilities available/Lab and field facilities:

PART- IV: BUDGET INFORMATION

1. Detailed budget:
2. Status of legal and accounting system:

PART- V: PREVIOUS FUNDING INFORMATION ALLOCATION FROM MINISTRY OF CULTURAL AFFAIRS

1. Did you receive any funding allocation from MOCA since 2020-2021? Yes/Not (If your answer is yes please fill up the following sections)
2. Funding year:
3. Amount of fund(in taka):
4. What was the title of the project?
5. Is project completed or not?
6. If not what is the expected date of completion?
7. Already submitted working report or not?



8. Expected date of submission the report of completion the project?
9. Any paper published in any international, regional/local journal from this research?
10. Quote the name of the journal, date of publication and title of the paper:

PART- VI: DECLARATION/CERTIFICATION

It is certified that-----

1. The same project has not been submitted to any other agency/agencies for financial support.
2. The research work proposed in this project is not a duplicate work already done or being done in the field (i.e. area of research).
3. We agree to accept the terms and conditions developed for the allocation for culture and heritage as mentioned in the guidelines.
4. Associate investigator assured the responsibility of the project in case the principal investigator leaves the institution/organization.
5. Project will be provided with access to all available facilities in this organization.

Signature and Name of
the Principal Investigator
(With seal, Telephone number
& Mobile number)

Signature and Name of the head of
the Organization / Institutes /
University (With seal, Telephone
number & Mobile number)

Signature and Name of
the Associate
investigator:
(With seal, Telephone number &
Mobile number)

Signature and Name of the
Associate investigator:
(With seal, Telephone number &
Mobile number)

