

Fellowship / Grant Application Form

Sl. No	Content	Particular
1	Name of the Applicant	BRINDHA P
2	Designation	Assistant Professor
3	Name of the School	School of Nursing
4	Year of Submission	2018-2019
5	Submission Date	03.08.2018
6	Application Type	Individual
7	Nationality	Indian
8	Name of the Fellowship	International collaboration for Advanced Research
9	Stature of Fellowship	National
10	Awarding Agency	Medi Biotek (India) Pvt. Ltd.,
11	Duration	6 Months
12	Budget	Rs. 120333 /-
13	Remark	NA

Signature(s):

Name

: BRINDHA P

Date

: 03.08.2018



Approved By



No Objection Certificate

Date: 03.08.2018

This is to certify that **BRINDHA P**, is working as Assistant Professor, School of Nursing, Bharath Institute of Higher Education and Research, deemed to be University, Chennai. BRINDHA P is interested in **International collaboration** for **Advanced Research**. The Institute has "No Objection" in his / her application for grant being considered for funding and his / her undertaking. This NOC is issued the purpose of receiving grant / Fellowship from **Medi Biotek (India) Pvt.** Ltd.,.

School of Nursing

BIHER





MEDI BIOTEK

Date: 10.08.2018 Ref: MB / 2018 / 238

To:

BRINDHA P,
Assistant Professor,
School of Nursing,
Bharath Institute of Higher Education & Research,

Chennai – 600 073.

Respected Sir,

Regarding the approval of the proposal for the International collaboration for Advanced Research

We are pleased to tell you that your request for funding the Advanced Research Training has been acceded after careful examination of its contents inclusive of the pieces of information apart from providing the data of the subsequent. You have been shortlisted to receive funding as part of the International collaboration for Advanced Research. As a consequence of this, we are writing to inform you that the sum of Rs. 120333 /- [Rupees One Lacs Twenty Thousand Three Hundred Thirty Three Only] requested in your application (BIHER / 2018-2019 / Fellow / 3418 dt. 03.08.2018) has been authorized for utilization toward a Advanced Research Training that is scheduled for 6 Months.

If you want to accept the award and get paid for it, you need to make sure that the grant agreement is filled out correctly and that you send it back within two weeks. Instead of requiring you to pay for the fellowship out of your own money and then submitting a request for reimbursement, our fellowship payment option allows you to receive a direct stipend. This allows you to concentrate on your research without being distracted by concerns about money. In addition, once your fellowship has come to an end, you will be required to write and submit a report discussing your time spent there. Please send any relevant receipts, software, and images along with your report. Remember that you will be responsible for repaying that funding if you are forced to stop working on your project before it is completed.

We hope that everything works out well for you.

FOR MEIN GIOTE CONTENT TO.

MEDI BIOTEK (India) Pvt Ltd; 4/29, Letangs Road, Vepary, Chennai - 600010. Phone: +91 44 40000 100/109

Email: info@medibiotek.com



Internal Review Report

Sl. No	Name of the Applicant	Particular
II.	Name of the Applicant	BRINDHA P
2	Applicant Type	Individual
3	Designation	Assistant Professor
4	Name of the School	School of Nursing
5	Proposal Ref No.	BIHER / 2018-2019 / Fellow / 3418
6	Proposal	03.08.2018
7	Name of the Fellowship	International collaboration for Advanced Research
8	Stature of Fellowship	National
9	Awarding Agency	Medi Biotek (India) Pvt. Ltd.,
10	Year of Award	2018-2019
11	Duration	6 Months
12	Purpose of Grant	Advanced Research Training
13	Remark	NA



