

CENTRE FOR TECHNOLOGY DEVELOPMENT AND TRANSFER
ANNA UNIVERSITY, CHENNAI - 600 025
REQUEST FOR PROJECT PROPOSAL FORWARDING TO FUNDING AGENCY

Date: _____

Name of the Principal Investigator, Designation and Department / Centre :

Title of the Project :

Name of the Funding Agency (Mention the Scheme if any) :

No. of Project Proposal Copies to be forwarded to funding Agency :

	Hard Copy	(_____)Nos
	Soft Copy	(_____)Nos

Address to which the project proposal to be forwarded :

Type of Proposal (Tick the Appropriate one) : New Proposal Revised Proposal

******Note: Please submit an additional copy of the project proposal for CTDT.**

<p>Forwarded</p> <p>Signature of the HOD / Director with Seal and Date</p>	 <p>Signature of PI With Seal and Date</p>
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