

TAMILNADU STATE COUNCIL FOR SCIENCE AND TECHNOLOGY
(An Autonomous body of Govt. of Tamilnadu)
DOTE Campus, Chennai - 600 025

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APPLICATION FOR GRANT UNDER THE SCHEME
DISSEMINATION OF INNOVATIVE TECHNOLOGY (DIT)-2020-21

Under this scheme, innovative technologies are to be disseminated by educational / research institutions of our state through training / workshop / awareness program for the benefit of target groups such as farmers, fishermen & women, self help group members and others. A sum of Rs.50,000/- may be provided for one programme with beneficiaries of about 50 to 100 with a duration of 3-5 days. Two copies of proposals may be submitted to “The Member Secretary, Tamilnadu State Council for Science and Technology, DOTE Campus, Chennai - 600 025” **on or before 20.11.2020.**

PART-I GENERAL INFORMATION & DETAILS OF THE PROGRAMME

1. Programme Title :
2. Broad Subject Area :
3. Implementing Agency
 - a. Name of the Agency
 - b. Complete address with pincode
 - c. Phone No.; Fax; E-mail
4. Name and address of Co-ordinator :
of the Programme
5. Duration & Total Cost :
6. Programme Summary :
7. Details including the nature of the innovative technology to be disseminated
8. Details indicating how the dissemination of innovative technology will be achieved including methodology and tentative time schedule
9. Economic status and how the programme will benefit the target population:
10. Objectives : a) Economical b) Social c) Environmental
11. Details on the implementing Agency :
12. Details on the infrastructure facilities available at the implementing agency for the dissemination of innovative technology :

13. Expertise available for the conduct of this programme :
14. Linkage with other S&T institutions:
15. Details of employment / revenue generation:
16. Techno - economic viability/ cost-benefit analysis:
17. Comment on the possibility of this activity becoming self-sustainable :
18. Have you conducted DIT programme previously with the assistance of the Council ?
If so provide details:

PART-II BIO DATA OF CO-ORDINATOR(S)

1. Name :
2. Designation :
3. Department :
4. Institute / University :
5. Address :
6. PIN :
7. Telephone (O) :
(R) :
8. Email :
9. Date of Birth :
10. Sex :
11. Educational Qualification :
12. Research Experience :
13. Papers Published (List) :
14. M.Phil/ Ph.D Produced (list) :
15. Books published (list) :
16. Patents taken (list) :
17. List of other ongoing/completed projects :
18. Any other relevant information :

Place :

Signature of the

Date :

Co-ordinator

PART - III BUDGET

Sl.No.	Item of the Expenditure	Amount (Rs.)
	Total	

Programme Co-ordinator

Head of the institution

Date

Date

OFFICE SEAL