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**College of Graduate Studies and Scientific Research**

**Department of Scientific Research**

**Research Fund Application Form**

Funding Institute:

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project ID Number**  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |
| --- |
| Project Title : |
| **عنوان البحث باللغة العربية:** |

#### Type of Fund (Select one)

|  |  |  |  |
| --- | --- | --- | --- |
|  Seed Research Grant  (New faculty) |  Competitive Research Grant |  Collaborative Research Grant with Public & Private Organizations |  |

**Researchers Participation:**

|  |  |  |  |
| --- | --- | --- | --- |
| One Department | More than One Department in One College | Several Colleges in QU | External Participants |

**Principal Investigator (PI)** (PI may not hold QU funding for more than two projects at the same time)

 Full Name: Signature: University ID:

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| --- | --- | --- | --- |
|  Academic Rank:  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax : email: |

On-Going Research Projects Involving the PI (Include Internal and Externally Funded projects)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Project Title / Type | Source of Funds | Amount of Funds | Period |
| From | To |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

**Internal Co-Investigator(s)**

1. Full Name: Signature: University ID:

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|  Academic Rank:  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax: email: |

1. Full Name: Signature : University ID:

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|  Academic Rank  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax: email: |

1. Full Name: Signature: University ID:

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|  Academic Rank:  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax: email: |

1. Full Name: Signature: University ID:

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|  Academic Rank:  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax : email: |

1. Full Name: Signature : University ID:

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|  Academic Rank:  | Assistant Prof   | Associate Prof   | Professor |

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|  College: Department: |
|  Telephone : Fax: email: |

**External Co-Investigator(s)(**For collaborative Research Projects:Please attach an official letter confirming the amount of the funds contributed by the external organization to the project and authorizing the nominated external individuals to participate in the project)

|  |  |  |
| --- | --- | --- |
| 1. Full Name:
 | Signature:  |  |
| Organization / Department : | Position:  |
| Telephone: Fax:  | E-mail:  |

|  |  |  |
| --- | --- | --- |
| 1. Full Name:
 | Signature:  |  |
| Organization / Department : | Position:  |
| Telephone: Fax:  | E-mail:  |

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| --- | --- | --- |
| 1. Full Name:
 | Signature:  |  |
| Organization / Department : | Position:  |
| Telephone: Fax:  | E-mail:  |

 **Please attach full CV for each investigator.**

1. Abstract

Present here a brief abstract of your research project (Maximum 250 words )

1. **Abstract in English**

1. **Abstract in Arabic**
2. Problem formulation and Project Objectives
3. **Problem formulation**
4. **Project Objectives**
5. Expected Research Outputs :

(Publication of refereed books, book chapters, articles in refereed journals, conferences, or patents, software, products, creative works, etc,…)

1. Potential Project Impacts:
2. Knowledge Enrichment
3. Importance to Community (Socio-economic impacts)

1. Possibility of Innovation and potential commercial product

1. Research Methodology
2. Literature Review and Critical Analysis of Related Work
3. Discuss any Related Ethical Issues:

(Does the project contradict in any way the teachings of Islam or the Arabic Culture, Does the project involve using animals, humans, or samples from animals and humans, etc,…Does the research involve collecting information of special nature or implications, etc,…Do you need special approvals to obtain samples, or conduct any aspect of the research , Specify the kind of risks involved and what protection the PI has for the safety of subjects, etc,…)

1. Cooperation with external institutions related to project (agreements, joint work, etc,…):
2. Tasks and milestones of the project (briefly describe each task and milestone):
3. Project Schedule of Execution of Research Project Tasks:

|  |  |  |  |
| --- | --- | --- | --- |
| **Task** | **Year1** | **Year 2** | **Year 3** |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **11** | **12** |
| **Task-1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Task-2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Task-3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Task-4** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Task-5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Budget of the Proposed Research

**Budget must be in UAE Dirhams**

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Item | **Amount** **Required** | **Justifications**(Explain why this item is essential for the project) |
| **1** | **Research Assistants** |   |  |
| **2** | **Small Equipment** |  |  |
| **3** | **Testing, Analysis, and Field Work** |  |  |
| **4** | **Consumables** |  |  |
| **5** | **Publications** |  |  |
| **6** | **Travel (used for field test, data collection,…etc.)** |  |  |
| **7** | **Conference Attendance (Only applied to competitive, targeted, and collaborative research proposals with at least two years duration)** |  |  |
| **8** | **Software** |  |  |
| **9** | **Stationary** |  |  |
| **10** | **Other Items** (Include details) |  |  |
|  | Total |  |

1. Available or Expected External Sources of Funds
2. Names and Contact Details Including Affiliation and Email of at least Five Potential Reviewers, avoiding conflict of interest.

**Research Project Refereeing Criteria**

|  |  |  |
| --- | --- | --- |
|  | **Criterion** |  |
| First | **Project Formulation and Project Objectives**  | 1. Is the problem well defined and indicates potential contribution to knowledge?
2. Do the objectives clearly address the problem and are achievable?
 |
| Second | **Expected Research Outputs** | Expected Publication of refereed books, book chapters, articles in refereed journals, conferences, or patents, software, products, creative works, etc,…….. |
| Third | **Potential Project Impacts** | 1. Is the project expected to add to scientific knowledge?
2. Is the project expected to contribute to the development of the community?
3. Possibility of innovation and potential commercial product.
 |
| Fourth | **Methodology** | 1. Are the conceptual framework, design, methods, and analyses used in the project satisfactory and adequate?
2. Is the methodology appropriate to the objectives of the project in question?
3. Are the applicants aware of the potential problems likely to occur while conducting the research? Do they have alternative methods?
 |
| Fifth | **Researcher(s)** | 1. Research track record of the investigator(s).
2. Integrated experience of the research team for this project.
 |
| Sixth | **Project Schedule** | Is the proposed schedule appropriate for achieving the project objectives? |
| Seventh | **Budget** | 1. To what extent are the budget items commensurate with the project?
2. Is there an external source of fund for the project?
 |



**College of Graduate Studies and Scientific Research**

**Department of Scientific Research**

**Research Grant Processing Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Project ID Number**  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **Project Title:** |
| **Applicant's Name( Principal Investigator)** | **Signature:** | **Date:** |

**Chair of Academic College Research Committee.**

The committee, in its meeting number………held on …….………, has considered the application and provided comments to the applicant to improve its quality and ensure its adherence to the bylaws.

|  |  |  |
| --- | --- | --- |
| **Name:** | **Signature:** | **Date:** |

**Dean of Academic College:**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Signature:** | **Date:** |

 **Research Unit**

Received on: …./…../………..

Date of Sending the Project to Refereeing: …………………………………………………………………….……………….

Date of Completion of Project Refereeing:…………………………………………………………………….……………….

Refereeing Results:……………………………………………………………………………………………….……………..

Summary: ……………………………………………………………………………………………………………………… ……………………………………………………………………………………………..…………………………………….

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