

**REGISTRATION PROCESS
AND
ONLINE PROPOSAL
SUBMISSION**

BIOTECHNOLOGY INDUSTRY RESEARCH ASSISTANCE COUNCIL

A Government of India Enterprise



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Welcome to BIRAC

Biotechnology Industry Research Assistance Council (BIRAC) a Section 25 "Not-for-Profit Company" of Government of India, registered under India Companies Act 1956, has been set up as Department of Biotechnology's interface agency, which serves as a single window for the emerging biotech industries. BIRAC is guided by an Independent Board of Directors comprising senior professionals, academicians, policy makers and industrialists.



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User Name

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hp7kz

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Registration

What is Company User?

[Click here to register as Company User](#)

For online submission of BIPP project the registration has to be done as **"Company User"** and not the individual project coordinator.

As per BIPP guidelines the eligibility criteria is as follows :

A single or consortia of Indian "for profit" company (ies) – Small, Medium or Large having DSIR recognized* in house R&D unit (s). An Indian Company is defined as one which is

What is Institution User?

[Click here to register as Institution User](#)

For online submission of project under CRS scheme the registration has to be done as **"Institution/University User"** and not the individual project coordinator.

As per CRS Scheme guidelines

1) Eligibility Criteria is as follows :

Public and Private Universities and Research Institutes can apply under the Contract Research and Services Scheme with pre-determined company partner having a DSIR recognized

What is BIG Scheme User?

[Click here to register as BIG Scheme User](#)

As per BIG scheme guidelines

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Please fill the registration form in order to retrieve the password and submit online proposal for active call.

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new

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Institution User Registration

*User Name	<input type="text"/>	Check Availability
*Company Name	<input type="text"/>	
*Email	<input type="text"/>	
Institution Details		
*Academia Type	<input type="text" value="-Select Academia T"/>	
*Address 1	<input type="text"/>	
Address 2	<input type="text"/>	
Street/Village	<input type="text"/>	
*City/Town	<input type="text"/>	
*State	<input type="text" value="-Select State-"/>	
Country	<input type="text" value="India"/>	
*Pin / Zip Code	<input type="text"/>	
*Landline	<input type="text" value="(+) Country Code - Area Code - Telephone Number"/>	

News Updates

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Login

User Name:
Password:
Verification Code:

h8g6j

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On Submission of the above form, user name and password will be sent on your Email ID. Same credentials can be used for submission of any number of proposals

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After retrieving the password on
registered email id enter the login
credential to submit a new
proposal

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User Name

Password

Verification
Code

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Sign in

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Screen looks as follows after you Login



Programmes

- Contract Research and Service Scheme(CRS)



Click here

Note:- To Proceed Click On Relevant Programme

Reports & GuideLines

[CRS User Guide](#)

[Submission Of Online Proposal Under CRS
Process Flow Chart](#)



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Click here to submit new proposal under Active Call for Proposal

	Status Of Proposals Submitted	Status Of Sanctioned Projects	Project Monitoring
↑ ■ Test Call for Proposal..... <i>Last Date of Submission : 22 Dec 2012</i> ■ Call for Proposals under BIPP..... <i>Last Date of Submission : 30 Nov 2012</i> ■ Special Call for Proposals on Priority A..... <i>Last Date of Submission : 15 Sep 2012</i> ■ Call for Proposals under BIPP-23rd Batch..... <i>Last Date of Submission : 01 Aug 2012</i> ■ Special Call for Affordable Health Care <i>Last Date of Submission : 30 Jun 2012</i> ■ Call for Proposals under BIPP..... <i>Last Date of Submission : 31 Mar 2012</i> More..	■ Proposal Submitted .. 0 ■ Under Consideration(ARP/TSC /Apex) .. 0 ■ Revision Required .. 0 ■ Additional Upload Required .. 0 ■ Ineligible (OR) Not Recommended .. 0	■ Approved (OR) Recommended .. 0 ■ Completed Projects .. 0 ■ Foreclosed Projects .. 0 ■ Terminated Projects .. 0	■ Progress Reports .. 0

Note:- History Of Proposals Submitted Earlier (If Any) Will Be Uploaded Shortly.

Use Only Mozilla Firefox

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Important note to be kept in mind before clicking on Save and Continue Button.

[New Proposal Submission Under Call: : CRS -02/12-BIRAC Announces Contract Research and Services Scheme \(CRS\) - Second Call for Proposals](#)

[CRS User Guide](#)

Basic Information

Note: All fields on this page are non-editable, except the Title of Proposal.

Name Of The Institution **JT**

Type Of The Institution / University

* Title Of Proposal

* Proposal Duration Year(s) Month(s)

* Relevant Area

* No.Of Collaborators [Enter Collaborator\(s\) Details](#)

Please provide a brief title not exceeding 250 characters.

(i) Please do not put any space before the starting of the first word .
(ii) Don't use the special characters inside the box in all the enclosed forms.

Select appropriate relevant area as per the need of your proposal.

☐ I accept the Terms and Conditions [Click here to read Terms & Conditions](#)

[Reset](#)

[Save and Continue](#)

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Once you click on Save and Continue Button, a list of all the forms which need to be filled in will be displayed (with status of each form). The default status for each form will be "Pending". You need to click on the form name to enter relevant information. The status turns into "draft" on clicking "save as draft" and into "done" once you save the form. Any form can be edited till you click the final submit button.



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List of Forms to be filled in

PROPOSAL SUBMISSION FORMS

[CRS User Guide](#)

Call for Proposal: CRS -02/12-BIRAC Announces Contract Research and Services Scheme (CRS) - Second Call for Proposals

Proposal Submission Under Category I&II *(Click on the Relevant Form for filling & submission)*

BASIC INFORMATION

*** Required Forms**

Status
Done

PARTICULARS OF THE APPLICANT(S)

*** Required Forms**

Status
Pending
Pending
Pending

PROPOSAL DETAILS

*** Required Forms**

Status
Pending
Pending

PROPOSAL OBJECTIVE AND TIMELINES

*** Required Forms**

Status
Done
Pending
Pending

PROPOSAL MILESTONES

*** Required Forms**

Status
Pending

BUDGET JUSTIFICATIONS

*** Required Forms**

Status
Pending
Pending
Done
Pending
Pending
Pending
Pending
Pending

BUDGET SUMMARY AND DETAILS

*** Required Forms**

Status
Pending

DECLARATION

*** Required Forms**

Status
Pending

After Clicking on Save & Continue button the status of the Basic Information changed to Done

Click here to enter the information about the applicant institute

Pending status reflects that the information has not been filled yet for the corresponding form on the left side

This form will not open till you have provided information for proposal objectives.

This form requires information to be filled in the objectives and activities form.

These forms device information form budget justification forms and will not open up till data has been submitted under the same.

[Final Submit](#) [Preview](#)

To be clicked only after you have filled in all the forms and you are confident of the data filled in. Information cannot be edited once you click this button.

INSTITUTION DETAILS

Name of the Institution JT

Contact Details

Address1:	Address1	Address2:	
Street/Village:		City/Town:	City
State:	UTTAR PRADESH	Country:	India
Pin / Zip Code:	208001	Landline:	91-45678-789456123
Fax:	91-456-7899456666	Website:	www.testuser.com

Brief Background Of The Institution

*Year Of Establishment Of The Institution

(Eg:-2009)

*Recognition or Accreditation Status

(i) Please do not put any space before the starting of the first word .
(ii) Don't use the special characters inside all the boxes.

*Upload file

Browse...

*R&D Activities (Area)

(i) Please upload the file.
(ii) File should be in pdf format only.
(ii) File Name should contain any space or special characters.
(iii) PDF file size should not be greater than 2MB.

*Source of Core Funding

Project Coordinator Details

*Title	Select	Last Name	<input type="text"/>
*First Name	<input type="text"/>	*DOB	<input type="text"/>
*Designation	<input type="text"/>	*Highest Qualification	<input type="text"/>
*Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female	*Address1	<input type="text"/>
*Email	<input type="text"/>	*Street/Village	<input type="text"/>
Address2	<input type="text"/>	Pin / Zip Code	<input type="text"/>
*City/Town	<input type="text"/>	*Country	India
*State	--Select State--		
Landline	<input type="text"/> - <input type="text"/> - <input type="text"/>	Mobile	<input type="text"/> - <input type="text"/>
*Please Upload Resume In Prescribed Format		Browse...	
*Please Upload Institution's Authorisation Letter For Submission Of Proposal In Prescribed Format		Browse...	

Save as Draft signifies that this whole form can be saved in draft mode and user can also fill the details later.

Save as Draft Save Reset Cancel

Reset button basically reset all the information filled above.

(i) Before pressing Save button ensure that all the details asked in the company details form has been filled properly.
(ii) User can also edit the information after pressing the Save button.
(iii) After clicking on Save button, both Save as Draft and Save button will replace by Update button.

Note: Please download to fill the details and signed copy to be uploaded in the pdf format

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After pressing Save as Draft or Save button click on close button to store the information.

INSTITUTION KEY INVESTIGATORS

Press Add New button to enter key investigator details.

Add New Close

S.NO	Name	Designation	Email	Landline	Mobile	Resume	Edit
No records found.							

Click on edit button in order to edit the information

Key Investigator Details

*Title Select

*First Name

Last Name

Gender ☒ Male ☐ Female

*Designation

* Landline

* Mobile

*Email

*Please upload resume in Prescribed Format Browse...

Save as Draft Save Cancel

Save as Draft signifies that information has been stored in draft mode and user can also fill the details later.

Click here to go back

- (i) Before pressing Save button ensure that all the details asked above has been filled properly.
- (ii) User can also edit the information after pressing the Save button.
- (iii) After clicking on Save button, both Save as Draft and Save button will replace by Update button.

SHAREHOLDING PATTERN OF THE COMPANY COLLABORATOR(S)

Please enter only the numeric values in all boxes.

<u>Collab1</u>		<u>Company</u>	
S.No	Category of shareholder	Number of shareholders	Total number of shares
Shareholding of promoter & Promoter Group			
Indian			
1. a)	Indian Citizen		
b)	Indian Company		
2)	NRI holding Indian Passport (Does not include OCI/PIO)		
Total		0	0
Public Shareholding			
Foreign			
1)	Foreign - NRI (OCI/PIO)		
2.a)	Foreign - Individual		
b)	Foreign - Company		
Total		0	0
Grand Total		0	0
*If Indian Company is one of the Shareholders		<input type="radio"/> Yes <input type="radio"/> No	

*Note : If an **Indian Company** is one of the Shareholders in the present company then the shareholding pattern of such company has to be provided separately in the same format as mentioned above and uploaded as an additional information.*

COLLABORATOR COMPANY DETAILS

Company Contact Details

*Name of the Company	Collab1
*Address1	<input type="text"/>
Address2	<input type="text"/>
Street/Village	<input type="text"/>
*City/Town	<input type="text"/>
*Country	--Select Country--
*State	--Select State--
Pin / Zip Code	<input type="text"/>
Landline	(+) <input type="text"/> - <input type="text"/> - <input type="text"/>
Mobile	(+) <input type="text"/> - <input type="text"/>
Fax	(+) <input type="text"/> - <input type="text"/> - <input type="text"/>
Website (url)	<input type="text"/>
*E-mail	<input type="text"/>

Company's Activities

*Year Of Establishment Of The Company	<input type="text"/> (Eg :-2009)
*Manufacturing:	<input type="text"/>
*Trading / Import & Marketing:	<input type="text"/>
*R & D Activities:	<input type="text"/>

*Type Of The Company: (Please mark the relevant)

☐ Public Limited ☐ Private Limited

(i) Please upload the file.
(ii) File should be in pdf format only.
(ii) File Name should contain any space or special characters.
(iii) PDF file size should not be greater than 2MB.

*Please Upload Company Registration Certificate

Please Upload Annual Report Of The Organization For The Previous Financial Year

*Are The Shares Of The Company Held To The Extent Of 51% By Indian Citizens?

☐ Yes ☐ No

*Promoters Background Including Association With Other Companies And Contribution In Those Companies

*Shareholding Pattern Of The Company Indicating Name And Address Of Foreign Shareholders, Overseas Corporate Bodies And Shares Held By NRIs

*Shareholding Details

<input type="text"/>	Browse...
<input type="text"/>	Browse...
<input type="text"/>	Browse...
<input type="text"/>	Browse...

<input type="text"/>

DSIR Recognition Details

*Does The Company Have Valid DSIR Recognized In-House R & D Unit?

☐ Yes ☐ No

*Are There Any Outstanding Loans?

☐ Yes ☐ No

*Has The Company Received/Applied For Funding From Government/Any Other Agency For The Same Or Related Project?

☐ Yes ☐ No

Key Investigator Details

*Title

Select

*First Name

Last Name

*Designation

*DOB

*Gender

☒ Male ☐ Female

*Highest Qualification

*Email

*Address1

Address2

*Street/Village

*City/Town

Pin / Zip Code

*State

--Select State--

*Country

India

Landline

Mobile

*Please Upload Resume In [Prescribed Format](#)

Browse...

Note: Please download to fill the details and signed copy to be uploaded in the pdf format.

Save as Draft

Save

Reset

Cancel

Save as Draft signifies that this whole form can be saved in draft mode and user can also fill the details later.

(i) Before pressing Save button ensure that all the details asked in the collaborator company details form has been filled properly.
(ii) User can also edit the information after pressing the Save button.
(iii) After clicking on Save button, both Save as Draft and Save button will be replaced by Update button.

After pressing Save as Draft or Save button click on close button to store the information.

COLLABORATOR KEY INVESTIGATORS

Press Add New button to enter collaborator key investigator details .

Add New Close

S.NO	Collaborator	Name	Designation	Email	Landline	Mobile	Resume	Edit
No records found.								

Click on Edit button in order to edit the information

Key Investigator Details

*Collaborator

*Title

*First Name

Last Name

Gender ☒ Male ☐ Female

*Designation

Landline - -

Mobile -

*Email

*Please Upload Resume In **Prescribed** Format

Save as Draft Save Cancel

Save as Draft signifies that information has been stored in draft mode and user can also fill the details later.

- (i) Before pressing Save button ensure that all the details asked above has been filled properly.
- (ii) User can also edit the information after pressing the Save button.
- (iii) After clicking on Save button, both Save as Draft and Save button will be replace by Update button.

Please fill up the form with appropriate information.

PROPOSAL SUMMARY

1. Abstract Of The Proposal Including Justification For Outsourcing The Study / Work

2. What Does The Present Proposal Aim At?

☒ Contract Research ☐ Contract Service ☐ Both

*****(2.1) Please Provide Details Of The Proof Of Concept/Leads Generated By The Institution Which are to be Validated For The Industry

*****(2.2) Please Provide Service Requirements Of The Institution

Save as Draft

Save

Reset

Cancel

TECHNICAL DETAILS

Please enter the required information

** Note: Please select and remove unused rows.*

** Note: All fields are mandatory and should not exceed 200 words.*

1.Key Elements & Significance Of The Proposal

2.Preliminary Data Available With The Institute on the Related Work

3.Relevant Publications and Patent by the Investigator(s) on related research

*Upload Detail *(Only Pdf allowed)*

4.Competence Of The Collaborator in Terms Of Facilities Available, Previous Experience and Expertise in Similar Research / Services

5.Is The Research / Service Agreement With The Collaborator(s) Signed?

☐ YES ☒ NO

6.IP STATUS For The Leads Developed By The Institution

6.1 List Of Patents That Appear To Cover Any Part Of The Technology Of Interest Or Similar (And Possibly Overlapping) Technologies And Thereby Restrict The Freedom-To-Operate In The Envisaged Area.

Select

☐

Patent Number

Patent Title

Add More

Remove

6.2 How Would The Present Proposal Be Able To Counter The Above Restrictions?

6.3 List The Various Patented Technologies / Processes / Products That Would Be Made Use Of For Manufacturing / Commercialization Of The Proposed Product / Process Along With The Status Of The Patents. Whether Permission / License For Use If Such A Patent Owned / Being Sought For By The Company?

Save as Draft

Save

Reset

Cancel

PROPOSAL OBJECTIVES & WORK PLAN

Note: Please select and remove unused rows.

Select	Objective	Methodology/Experimental Design Detailed Work Plan	Alternate Strategies
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			

The next form will ask you to provide activities for each objective mentioned here

(i) Please dont use the special characters in the box
(ii) All fields are mandatory.

Click here to add more rows.

After selecting the rows, press the remove button in order to delete the data in the respective rows.

OBJECTIVE WISE ACTIVITIES & TIMELINES

Note: The Proposed Financial Input Required Should Take Into Consideration The Contribution By The Company And Collaborator(s), If Applicable.

Please enter the activities under the respective objectives which are derived from the previous form i.e. PROPOSAL OBJECTIVES & WORK PLAN

(i) Text box signifies the month of start as well as end of the activities.
(ii) Only numeric values are allowed.
(iii) Total month should be less than the actual project duration.

Objective :Objective1

Select	Activities	Month Of Start Of Activity	Month Of End Of Activity	Indicators Of Progress	Role Of Academia (Yes/No) Add comments if any	Role Of Collaborators (Yes/No) (Add the Name of Particular Collaborator) if any
<input type="checkbox"/>		0				
<input type="checkbox"/>		0	0			
<input type="checkbox"/>		0	0			

* Financial Input Required(Rs.In Lakhs): 0

[Add More](#) [Remove](#)

Objective :Objective2

Select	Activities	Month Of Start Of Activity	Month Of End Of Activity	Indicators Of Progress	Role Of Academia (Yes/No) Add comments if any	Role Of Collaborators (Yes/No) (Add the Name of Particular Collaborator) if any
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

* Financial Input Required(Rs.In Lakhs):

[Add More](#) [Remove](#)

Objective :Objective3

Select	Activities	Month Of Start Of Activity	Month Of End Of Activity	Indicators Of Progress	Role Of Academia (Yes/No) Add comments if any	Role Of Collaborators (Yes/No) (Add the Name of Particular Collaborator) if any
--------	------------	----------------------------	--------------------------	------------------------	---	--

<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

* Financial Input Required(Rs.In Lakhs):

* Total Financial Input Required: 0

(i) Auto calculation of the sum of the values of all above financial input boxes.
(ii) Total financial Input required should match with the total budget provided under recurring and non recurring in the subsequent forms.

GANTT/PERT Chart

GANTT/PERT Chart Depicting The Milestones With Timelines To Achieve The Proposed Objectives

*Upload GANTT/PERT Chart [View file](#)



(i) Please upload only pdf file.
(ii) File Name should contain any space or special characters.
(iii) PDF file size should not be greater than 2MB.

Proposal MileStones

Note:- Please Select Atleast 3 Activities As Monitorable Milestones For Release Of Installments.

Objectives	Activities	Month Of End Of Activity(In Months)	Activities to be carried out by	Indicators Of Progress	Select
Objective1	Activities 1	4	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 1	<input type="checkbox"/>
	Activities 2	5	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 2	<input type="checkbox"/>
	Activities 3	6	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 3	<input type="checkbox"/>
Objective2	Activities 4	7	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 4	<input type="checkbox"/>
	Activities 5	8	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 5	<input type="checkbox"/>
	Activities 6	9	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 6	<input type="checkbox"/>
Objective3	Activites 7	2	<input type="checkbox"/> Amar <input type="checkbox"/> book <input checked="" type="checkbox"/> agency	Indicators Of Progress 7	<input type="checkbox"/>
	Activites 8	4	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 8	<input type="checkbox"/>
	Activites 9	6	<input type="checkbox"/> Amar <input type="checkbox"/> book <input type="checkbox"/> agency	Indicators Of Progress 9	<input type="checkbox"/>

Click here to set milestone for the proposal.

Select/Update MileStones

Select atleast three activities in order to finalize the milestones for release of installments.

S.No Milestones

Month Of End Of Activity(In Months)

Description

*1

Signing Of Contract

--NA--

--NA--

*2

Activities 1

4

*3

Activities 4

7

*4

Activites 7

2

*5

Submission Of Report

--NA--

--NA--

Update

Cancel

Enter the description for all the three milestones

AVAILABLE EQUIPMENTS DETAILS

NOTE: Please select and remove unused rows.

Details of Equipments Available for this Project with Applicant Institution

Select	Name Of Equipment	Units
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

Please mention the name of equipment as well as units of equipment.

Add More

Remove

Details of Equipments Available for this Project with Collaborator(s)

Collab1

Company

Select	Name Of Equipment	Units
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

Add More

Remove

Save as Draft

Save

Reset

Cancel

PROPOSED EQUIPMENTS & ACCESSORIES DETAILS

NOTE: Please select and remove unused rows.

Details Of Equipment Proposed To Be Acquired Through BIRAC's Contribution For Applicant Institute

Select	Infrastructure/Equipment	Capacity	Quantity	Specific Requirement In The Project	Total Estimated Value(Rs.In Lakhs)
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Auto calculation of the total cost of proposed equipment acquired through BIRAC's contribution for applicant institute..

Total *

Please enter total value and no per unit value for the equipment.

Accessories required for Equipment Proposed To Be Acquired Through BIRAC's Contribution For Applicant Institute (Rs in Lakhs):

Fill the cost of accessories to be acquired through BIRAC's contribution for applicant institute.

Total Grant for Equipemt and Accessories Requested from BIRAC(Rs in Lakhs):

0

Mention the details of manpower available with the institute/collaborator who will work on the project.

MANPOWER DETAILS AVAILABLE

** NOTE: Please select and remove unused rows.*

Manpower (Scientific and Technical) Already Available With Institute Who Will Work In This Project

Select	Name	Qualification	Age (In Years)	Full Time/Part Time (Specify Hours Per Day)	Experience (In Years)	Role In The Project	Position
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Manpower (Scientific and Technical) Already Available With Collaborator(s) Who Will Work In This Project

Collab1

Company

Select	Name	Qualification	Age (In Years)	Full time/Part time (Specify hours per day)	Experience (In Years)	Role In The project	Position
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Provide the details and total cost of hiring manpower through BIRAC's contribution for Applicant Institute.

← [MANPOWER DETAILS TO BE HIRED](#)

* NOTE: Please select and remove unused rows.

Manpower (scientific and technical) to be hired for the project through BIRAC's contribution for Applicant Institute

Select	Position	No Of Positions	Minimum Qualification	Experience (In Years)	Age Limit, If Any (In Years)	Duration For Which To Be Hired (In Years)	Role In The Project	Proposed Annual Salary (Rs. In Lakhs)	Total Cost
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Manpower hiring duration should not be greater than total project duration.

[Add More](#) [Remove](#)

[Save As Draft](#) [Save](#) [Reset](#) [Cancel](#)

Fill the details and total cost of consumable items through BIRAC's contribution for Applicant Institute.

CONSUMABLES DETAILS

**Note: Please Select And Remove Unused Rows.
Note:For Units ,Please fill NA if Not Applicable.*

Through BIRAC's Contribution For Applicant Institute

Select	Items	Quantity	Units (e.g. g/ml etc.)	Approximate Cost (Rs.in lakhs)	Justification For The Requirement
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount Required For Consumables:

Please fill the appropriate information in the form.



JUSTIFICATION FOR OTHER RECURRING HEADS

Through BIRAC's Contribution For Institution

Travel Cost
(Rs.In Lakhs)

Travel Justification

Contingency Cost
(Rs.In Lakhs)

Contingency Justification

Save as Draft

Save


Reset

Cancel

Form to be filled in with appropriate data.

← DETAILS OF WORK TO BE GIVEN TO THE COLLABORATOR

**Note: Please select and remove unused rows.*

Select	Specific Activities Proposed To Be Outsourced	Collaborator(s) To Whom It Is Proposed To Be Outsourced	Whether The Institution Has Already Signed Any Contract With This Company	Estimated Cost Involved In (Rs.in Lakhs)	Submit Details of Estimated Cost
<input type="checkbox"/>	<div></div>	<div>Select Collaborator</div>	<div></div>	<div></div>	<div></div>
				Total	<div></div>
					<div>Add More</div> <div>Remove</div>

Auto calculation of the amount based on the % provided above.

Save

Reset

Cancel

Biotechnology Industry Research Assistance Council

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DETAILS ON WORK TO BE OUTSOURCED For Collab1

Details on work to be outsourced through
through BIRAC's contribution for collaborator.

NOTE: All Fields are Mandatory.

Consumables Details Through BIRAC's Contribution

Select	Items	Quantity	Units (e.g. g/ml etc.)	Approximate Cost (Rs.in lakhs)	Justification For The Requirement
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Amount Required For Consumables:

Add More

Remove

Justification For Other Recurring Heads Through BIRAC's Contribution

Travel Cost (Rs.In Lakhs)	Travel Justification	Manpower & Contingency Cost (Rs.In Lakhs)	Manpower & Contingency Justification
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Grand Total (Rs in Lakhs):

Save

Cancel

Please enter the required information



OTHER FINANCIAL DETAILS

1.Details Of The Other Sources Of Funding Received/Requested/Committed For The Proposed Study.Please Include Government, Private, International Any Other Source

2.Funding Received So Far/Approved By Any Of The Government Agencies To The Institution To Carry Out Any Other Activity During The Last Five Years(Give Details Like Project Title, Amount Received/Approved, Funding Agency And Status Of The Project)

Save as Draft

Save

Reset

Cancel

BUDGET DETAILS

Details Of Proposed Budget Of The Project

Total Accessories cost through BIRAC's contribution for Applicant Institute.

I. Non Recurring Cost(Rs. In Lakhs)

Equipment (A)	Accessories (B)	Total (A+B)	Total Grant Requested From BIRAC (Rs in. Lakhs)
19.00	3.00	22.00	22.00

Equipment cost derived from the total equipments cost to be acquired through BIRAC's contribution for Applicant Institute.

Total cost of work details given to the collaborator.

II. Recurring Cost(Rs. In Lakhs)

Total cost of consumables to be acquired for the project through BIRAC's contribution for Applicant Institute.

Total contingency cost through BIRAC's contribution for Applicant Institute.

Manpower (A)	Consumables (B)	Travel (C)	Contingency (D)	Total Grant Requested for Collaborator (E)	Total (A+B+C+D+E)	Total Grant Requested From BIRAC (Rs in. Lakhs)
84.00	39.00	23.00	6.00	200.00	352.00	352.00

Total Project Cost (I + II)

Total travel cost through BIRAC's contribution for Applicant Institute.

374.00

Total cost of manpower to be hired for the project through BIRAC's contribution for Applicant Institute.

Verify Cancel

This form will verify only when Total Project cost is equal to objective wise activities cost under the heading OBJECTIVE WISE ACTIVITIES & TIMELINES

DECLARATION

*Please Upload The Declaration Document

Browse...

[Click Here to Download Prescribed Format.](#)

Save

Cancel



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PROPOSAL SUBMISSION FORMS

[CRS User Guide](#)

Call for Proposal: CRS -02/12-BIRAC Announces Contract Research and Services Scheme (CRS) - Second Call for Proposals

Proposal Submission Under Category I&II *(Click on the Relevant Form for filling & submission)*

BASIC INFORMATION

	* Required Forms	Status
* BASIC INFORMATION		Done

PARTICULARS OF THE APPLICANT(S)

	* Required Forms	Status
* PARTICULARS OF THE APPLICANT INSTITUTION		Done
* INSTITUTION KEYINVESTIGATORS		Done
* SHAREHOLDING PATTERN OF THE COLLABORATOR(S)		Done

PARTICULARS OF THE COLLABORATOR(S)

* PARTICULARS OF THE COLLABORATOR(S) *(To fill the Collaborator details Click on the Collaborator Name)*

S.No	Collaborator Name	Collaborator Type	Status
1	Project Directorate on Poultry	Institutions	Done
* COLLABORATOR KEYINVESTIGATORS			Done

PROPOSAL DETAILS

	* Required Forms	Status
* PROPOSAL SUMMARY		Done
* TECHNICAL DETAILS		Done

PROPOSAL OBJECTIVE AND TIMELINES

	* Required Forms	Status
* PROPOSAL OBJECTIVES & WORK PLAN		Done
* OBJECTIVE WISE ACTIVITIES & TIMELINES		Done
* GANTT/PERT CHART		Done

PROPOSAL MILESTONES

	* Required Forms	Status
* PROPOSAL MILESTONES		Done

BUDGET JUSTIFICATIONS

	* Required Forms	Status
DETAILS OF EQUIPMENT & ACCESSORIES		
* AVAILABLE		Done
* PROPOSED		Done
DETAILS OF MANPOWER		
* AVAILABLE		Done
* TO BE HIRED		Done
* CONSUMABLES DETAILS		Done
* JUSTIFICATION FOR OTHER RECURRING HEADS		Done
* DETAILS ON WORK TO BE GIVEN TO THE COLLABORATOR		Pending
* OTHER FINANCIAL DETAILS		Done

BUDGET SUMMARY AND DETAILS

	* Required Forms	Status
* BUDGET DETAILS OF THE INSTITUTION		Done

DECLARATION

* DECLARATION DOCUMENT

* Required Forms

Status

Done

Final Submit

Preview

Use Only Mozilla Firefox

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- After filling up the all the above forms click on final submit in order to submit the proposal.
- No form can be edited after you click this button.
- After submission of the proposal, you will receive an email confirming submission of the proposal and providing temporary number for the proposal. The proposal is then examined for eligibility and a permanent reference no. will be allotted and conveyed via email if the application qualifies all eligibility norms.