## Section A

**A 1. SIP Membership number of Principal investigator**:

**SIP Membership number of Co-investigators** :

**A 2. Principal Investigator Details**:

Name: Designation:

Institutional Affiliation:

Official Address

Phone No - Mobile: Office:

Email ID:

**A 3a. Co-Investigator Details**:

Name: Designation:

Institutional Affiliation:

Official Address

Phone No - Mobile: Office:

Email ID:

**A 3b. Co-Investigator Details** (if applicable, add more as per the proposal team)

Name: Designation:

Institutional Affiliation:

Official Address

Phone No - Mobile: Office:

Email ID:

**A 4. Application Category** (Tick as appropriate)

A. Postgraduate student ☐ B. Clinician ☐

C. Young researcher ☐ D. Senior researcher ☐

**A 5. Type of Research** (Refer to the research guidelines for details)

| S. No | Research Type | Tick as appropriate |
|---|---|---|
| 1 | Discovery Research | |
| 2. | Development research | |
| 3. | Clinical Research | |
| 4. | Descriptive Research | |
| 5. | Physiotherapy Education Research | |

**A 6. Title of the Proposed Research Study**:

**A 7. Summary of the Proposed Study** (300 words) A structured summary should contain the following subheadings: Rationale/ gaps in existing knowledge, Novelty, Objectives, Methods, and Expected outcome.

**A 8. Proposed Budget** (Up to a Maximum of INR 25,000 for Postgraduate student, Clinician, Young researcher categories and INR 50,000 for senior researcher category)

| S. No | Budget Head | Amount Requested from SIP (INR) |
|---|---|---|
| 1 | Research Equipment | |
| 2 | Investigations | |
| 3 | Intervention | |
| 4 | Consumables | |
| 5 | SIP conference registration (only for PG category) | |
| 6 | Total | |

**A 9.** **Details of Ethical Approval / Ethical Submission** (Ethical Committee, date of approval and reference number; attach copy of the approval letter. If applied and not obtained approval, provide proof of submission)

**A 10.** **Details Clinical Trial Registration** (Registration/acknowledgement number. If submitted but awaiting CTRI approval, provide details that were submitted to CTRI. Justify if the protocol does not require CTRI registration)

**A 11.** **Disclosures and Conflict of Interest** (Check guidelines for Details)

a) **Is the current proposal part of an ongoing research project or study?** Yes / No
If yes, provide a short summary of the ongoing project, what phase the project currently is in, what component of the project is funding sought from SIP and how the current proposal fits within the larger project.

**b) Are the Ethical approval and CTRI Registration title different from the current proposal title?** Yes / No
If yes, justify the discrepancy

c) **Are the Ethical approval and CTRI Registration in the name of PI.** Yes / No
If no, justify

d) **Are there any known conflict of interest to declare** Yes / No
If yes, provide details.

**Grant Application Submission Checklist**

Use the checklist and confirm if all supporting details/documents are provided with the application. The templates for annexure 1, 2, 5, and 6 are available in SIP website. The annexures with signatures need to be submitted as scanned PDFs by email along with the application.

| S. No | Item | Provide required details |
|---|---|---|
| 1a. | SIP Membership Number of PI | SIP No - |
| 1b. | SIP Membership Number of CI | SIP No - |
| 2 | **Annexure 1**<br>Letter of support and confirmation to assume responsibility for timely execution and completion of the grant from research supervisor for PG category and PhD Scholars | Submitted / Not Submitted / Not Applicable |
| 3 | **Annexure 2**<br>Letter of support from Head of the Institution | Submitted / Not Submitted |
| 4 | **Annexure 3**<br>Ethical Approval Letter / Proof of Submission to ethics committee | Submitted / Not Submitted |
| 5 | **Annexure 4**<br>Clinical Trial Registration Number / Acknowledgement Number (If applicable) | Submitted / Not Submitted / Not Applicable |
| 6 | Disclosures and Conflict of Interest in section A | Submitted / Not Submitted |
| 7 | **Annexure 5**<br>Brief Bio sketch of all investigators | Submitted / Not Submitted |
| 8 | **Annexure 6**<br>Declaration by the Investigators and Head of Institution | Submitted / Not Submitted |