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Sri Lanka College of Internal Medicine

Research Grant – Year …..

**Progress Report - Number \_\_\_\_\_**

**Grant Number: \_\_\_\_\_\_\_\_\_\_**

**Period covered: From \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_**

**I. Information on the Project/Project Personnel:**

1. Title of the Project:
2. Summary of the Project
3. Principal Investigator:
4. Co-Investigators:
5. Date of Award:
6. Date of initiation of the Project (if different from above):
7. Time Period covered by the Progress Report: From \_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_
8. Number of Research Student employed (Indicate whether the Research Student/s is/are registered for a postgraduate degree)
9. Number of Technical/Research Assistant employed:
10. Publications/Communications arising from the Project during the ReportingPeriod (Please attach copies

**II. Objectives of the Project**

**III. Objectives achieved to date.**

**IV. Brief description of research carried out during the Reporting Period**

**V. Results/Observations/Output**

**VI. Gantt Chart for Work Done**

**VII. a) Were there any deviations in the Work Plan when compared to the**

 **Original?**

 **b) Was Prior approval obtained for the deviations? Yes/No**

**VIII. Is the work on schedule?**

**IX. List of major items of equipment purchased during the Reporting Period**

**X. a) Expenditure incurred during the Reporting Period (Annex the Financial**

 **Statement issued by the Bursar)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Vote** | **Total Allocation****(Rs.)** | **Total amount****spent to date****(Rs.)** | **Percentage****spent out of total allocation** |
| Personnel: |  |  |  |
| Equipment: |  |  |  |
| Consumables: |  |  |  |
| Travel and Subsistence: |  |  |  |
| Sample Analysis |  |  |  |
| Statistical Analysis |  |  |  |
| Postgraduate RegistrationFees |  |  |  |
| Calibration of Instruments |  |  |  |
| Miscellaneous: |  |  |  |

**XII. Comments on Project implementation in Future, if any**

**XIII. Signatures: (Of all investigators)**

**XIV. Comments of the Dean of the Faculty/Signature**

**Format for Financial Report**

The financial position of Grant No ………………………… (of Rs………….) as at (Date) ………..is awarded to……………………………………through SLCIM Research Grant is as follows.

 Funds approved Total Balance

 by up to the Expenditure Available

 Reporting date

 Rs. Rs. Rs.

Personnel Research Student/s ………………… ……………….. ………………

 Technical/Research ………………… ……………….. ………………

 Assistant/s

Equipment- ………………… ……………….. ………………

Consumables- ………………… ……………….. ………………

Sample Analysis- ………………… ……………….. ………………

Statistical Analysis- ………………… ……………….. ………………

Calibration of Equipment- ………………… ……………….. ………………

Postgraduate Registration Fee- ………………… ……………….. ………………

Travel & Subsistence- ………………… ……………….. ………………

Miscellaneous- ………………… ……………….. ………………

**TOTAL**  ………………… ……………….. ………………

Unspent balance of the funds approved up to the Reporting Date

Funds approved -

Actual expenditure -

Balance as at \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_ -

Bursar Date -