SLCIM RESEARCH GRANTS 2025

APPLICATION FORM

Project title:
Main center (where the research is carried out)
Abstract of the research project (No more than 150 words)

Publication: (Please mention whether you intend to publish your research or part of your research
project in the Asian Journal of Internal Medicine (AJIM)
Principal Investigator:
Name:
DESIGNATION:
Contact No:
E-mail:
Address:
SLCIM membership Status: Life member Associate member
Other Investigators Investigator 2:
Name:
Designation:
Contact No:

E-mail:
Address:
Membership Status: Life member Associate member Non member
Investigator 3:
Name:
Designations
Designation:
Contact No:
E-mail:
Address:
Membership status: Life member Associate member Non member
Membership status. Elic member Associate member Non member
Investigator 4:
Investigator 4:
Name:
Designation:
Telephone:

E-mail:
Address:
Membership status: Life member Associate member Non member
Investigator5:
Name:
Designation:
Contact No:
E-mail:
Address:
Membership status: Life member Associate member Non member
Investigator 6:
Name:
Designation:

Contact No:
E-mail:
Address:
Membership status: Life member Associate member Non member
If the number of investigators exceeds 6 members including the principal investigator, please send the details of the others as an annexure.
Ethical Review Committee
Ethical approval: Obtained Pending
Annexed documents 1. Project proposal • Three (03) Hard copies without the names of the authors • One (1) Soft copy with the names of the authors 2. Ethical approval document (If ERC approval is obtained)
Signature of main Investigator