INDEX

Manual for (PACE)

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Step 1: Basic Information

Basic Information

•	Proposal Category									
•	Name Of The Orga	anization		Select						
C - I										
Sei	ect the organizatio	n name froi	m the select bo	DX.						
	our organization is ough Registration I		n the drop dov	vn, then please r	egister you	r company				
•	Title of Proposal Title of Proposal									
	Write the brief na	me of prop	osal which is n	ot exceeding 250	O characters					
•	Proposal Duration	Se	lect Year	Select Month						
	Select the duratio	n of the pro	posal.							
•	How did you come			oposals Select						
	Select the approp	riate option	accordingly.							
•	Relevant Area			Select						
	Select relevant are	ea according	gly.							
•	Type of Collaboration O Sole collaborators Choose one of the radio button accordingly. In type of collaborationwhen you choose "collaborators", a select box will be appeared.									
•	No. of CollaboratorsSelect Enter (s) Details									
	Here you have to choose the number of collaborators and click the "Enter Collaborators Details" button. After click on "Enter(s) Details" button, there is a number of rows of collaborator Details according to your selection. You have to fill the details here.									
			Collabora	ator Details						
	Sr No.	Collaborat	or Name		Collaborato	or Type				
ŀ	1									

Fill all the details accordingly.

I □ ccept the Terms and Conditions Click here to read Terms & Conditions.

Check the Term and conditions.

2

Save and Continue	Save your form.
Reset	Reset all your fields.

Step 2: Particular of the Applicant Institution

• Particulars of the Applicant Institution

Institution Details								
Name of the I	nstitution Alf	Alfa University						
Address1:	RZ-3B/215,	Address2:	J Block					
Contact Details								
Street/Village	West Sagarpur	City/Town	New Delhi					
State	Delhi	Country	India					
Pin/Zip code	110003	Landline	+91-11-24389600					
Fax	+91-11-24389611	Website www	v.rishichandil.in					

Above details are automatically comes while you are in applicant details page. These are the details which you filled at the time of registration.

Brief Background of the Institution						
*Year of Establishment Of						
*Recognition or Accreditation Status						
*Please upload registration/recognition	certificate from a statutory body					
	Browse					
*R&D Activities (Area)						
*Source of Core Funding						
* =						

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

0	0	Yes	No

If yes, then give details of funding received/ requested by the Institute for the submitted proposal or technically related proposal from other funding agencies (indicating the Project Title, Amount Received/Approved, Funding Agency and Current Status of the Project.)

If you choose "yes", a "Number of Times" select box will appeared. You have to choose the number and click on "Enter Details" button.

Number of Times --Select-- Enter Details

After clicking on "Enter Details" button a "Funding Details" box will be appeared according to your selection in "Number of Times" select box.

Funding Details

Project Title	Funding Agency	Total Project Cost (Rs. In Lakhs)	Present Project Status	Date of Start	Date/D ue Date of Comple tion	Amount Received As Grant- In-Aid (Rs. In Lakhs)	Amount Received As Loan (Rs. In Lakhs)	Total Approved Cost (Rs. In Lakhs)
			Select					

Have you been been associated with any other BIRAC funding scheme? If Yes, List all the projects previously submitted by the Institute with BIRAC as per the attached format

Scheme	Reference No.	Status	Proposal Status(Ongoing/Completed/Reject / Foreclosed/Terminated)	ed/Withdrawn
Select				
Add				Delete

Fill all the details accordingly.

Save as Draft

If you omega modified to the same as Draft modified

If you don't want to save this form now. You save it next time with modification.

Save

Save your form.

Reset

Reset all your fields.

Cancel

Cancel your form and it return you to main page

Step 3: Principal Key Investigator Details

Principal Key Investigator Details								
*Title	Select							
*First Name		*Last Name						
*Designation		*DOB	DD-MM-YYYY					
*Gender *Email	O O Male Female	*Highest Qua.						
		1						
*Address1		Address2						
*Street/Village		*City/Town						
Pin/Zip Code]						
*State	Select	Country	Select					
Landline								
Mobile								
*Please Upload	Resume in Prescribed For	mat Browse						
Note: Please dov	vnload to fill the details ar	nd signed copy to be upload	ed in PDF format.					
Please Upload In	dustry's Authorisation Le	etter to for Submission of P	roposal in Prescribed					
Format		Browse						
Note: Please download to fill the details and signed copy to be uploaded in PDF format.								
* Fill all the mandatory details for Primary key investigator details.								
Save as Draft	If you don't want to modification.	save this form now. You sav	ve it next time with					
Save	Save your form.							
Cancel	Cancel your form.							

Step 4: Applicant Team Members

Applicant Team Members

S.	Name	Designation	Email	Landline	٨	Add New	<mark>}∈</mark> (Close
No								
1	RishiCha ndil	Junior Assistant	ris@gmail .com	011-24389600	99	99999999	View File	Edit

The table data automatically added when you fill the form, which is appeared when you clicked on "Add New" button.

Key Investigator Details

Title	
First Name	Select
Last Name	
	• 0
Gender	Male Female
Designation	
Landline	
Mobile	
Email	
Please Upload	Browse

Resume in Prescribed Format (Click for the prescribed format)

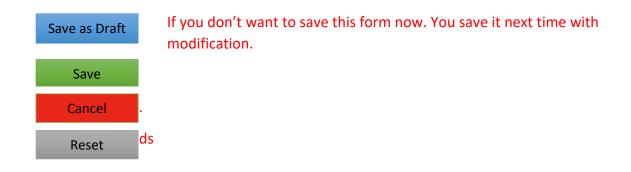
Fill all the mandatory fields accordingly.



If you don't want to save this form now. You save it next time with modification.

Step 5: Shareholding Pattern of the Applicant Organization and Collaborators Shareholding Pattern of the Applicant Organization and Collaborators

S. No.	Category of shareholder	Number of shareholders			Total number of shares		holding as f total per of s	Nature of Shares Equity Preference	
Shareholding of promoter & Promoter Group									
	Indian	,		ı		•		T	
1.a	Indian Citizen								
1.b	Indian Organization								
1.c	NRI holding Indian Passport (Does not include OCI/PCI)								
2.	Foreign	•							
2.a	Foreign NRI								
2.b	Foreign Individual								
2.c	Foreign Company								
Total			0		0		0.00		
Public 9	Shareholding								
1.	Indian								
1.a	Indian Citizen								
1.b	Indian Organizatio								
1.c	NRI holding Indiar Passport (Does no include OCI/PIO)								
2.	Foreign								
2.a	Foreign-NRI(OCI/F	PIO)							
2.b	Foreign Individual								
2.c	Foreign Organization								
Total			0		0		0	0.00	
Grand T	otal		0		0		0	0.00	



Step 6: PARTICULARS OF THE COLLABORATOR(S)

The number of collaborators you enter in basic information form will be appeared in following form:

S.No.	Collaborator Name	Collaborator Type	Status
1	Collaborator Name 1	Institution	Pending
2	Collaborator Name 2	Company	Pending

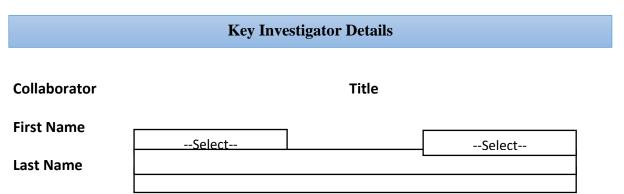
Click on "Collaborator Name" then a form will be open Fill the details of the Partner Details and Key investigator Details accordingly.

Step 7: Collaborator(s) Team Members

Collaborator Team Members

						Add N	ew _	Close	
S. No	Collabo rator	Name	Designat ion	Email	Land	AIIIIC	iviosile	- Nesume	Edit
1	Collab1	XYZ	ABC	xy@gmail.c	0122	2-541269	99753652	View File	Edit
				om			6		

The table data automatically added when you fill the form, which is appeared when you clicked on "Add New" button.



Gender	Male Female	O B
Designation		
Landline		
Mobile		
Email		
Please Upload	Browse	

Resume in Prescribed Format (Click for the prescribed format)

Fill all the mandatory fields accordingly.



If you don't want to save this form now. You save it next time with modification.

Step 8: MOU

Note: Please upload a copy of signed MoU between the Applicant Company and Collaborator(s). However, this upload is non – mandatory.

Note: If MoU is not yet finalized, please click on save button and the status of current page would automatically change to done.

Please Upload a Signed Copy of MoU With The Collaborator(s).

Collaborator(s)	Upload(MOU)	View File
Collaborator name 1	Browse	No File
Collaborator name 2	Browse	No File

Choose the MOU Files accordingly.



If you don't want to save this form now. You save it next time with modification.

Close Close the form.

Step 9: Proposal Summary

	Prop	oosal Summary	
* 1. TRL Status	Current TRL	Expected TRL	
	New Facility Stren	of existing facility	TRL Details
If you choose "Nev	w Facility" the followi	ng form will be appeared–	
* 2.1 Aim/Object	ive of the proposal		
2.2 Novelty of the * Not more than 1	• •		
l	Essence of The Stu	dy Highlighting The Followir	ng
* 3.1 Significance as Proposal	nd Impact/Value of the		
* 3.2 Rationale			
* 3.3 Inventive Sto	ep/Innovation		
* 3.4 Scope of Ind	ustrial Application		
* 3.5 National Imp Relevance	oortance / Social		
* 3.6 Commerciali	zation Potential		
* 3.7 Potential Co	mpetitors		
* 3.8 Risk Factors			

* 3.9 Has the Preliminary work done so Please upload the preliminary data avai	=	Yes	No	0
l de la companya de	If you click on '	"Yes" the f	ollowing	field are appeared
Upload the preliminary (If available)	Browse	View file		(Only pdf Allowed)
* 3.10. National and International status Of proposed technology or product.	s			
* 3.11. Business Strategy				
4. Is this Proposal Based on IP Owned by The Applicant/Collaborator/Licensed From Abroad?	١	●s "Yes" the f	No following	O field are appeared
•	0		0	
* Provide Details of IP Applicant O Jointly by Company & Col	Collaborator Li llaborator	censed Ov	vnership	Ву
* Upload Patent/Patent Applied for License Agreement	Browse	View file		(Only pdf Allowed)
Austria and C)	- 19 1- 1-		
Anticipated C	outcome / De	eliverabi	es	
5.1				
5.2				
5.3				
5.4				

5.5							
		Relevant reference	ces				
6.1							
6.2							
6.3							
6.4							
6.5							
	e you ever submitted under any of the BII		No Yes "Yes" the following field ar	e appeared Remove			
Select	Proposal reference No.	Proposal Title	Proposal Status	BIRAC Scheme			
Fill all the mandatory fields accordingly. Save as Draft If you don't want to save this form now. You save it next time with modification.							
	ose						

Reset all fields

Reset

Step 10: IP DETAILS

IP DETAILS

* Note: Please select and remove unused rows.

Add

Remove

TVOIE.	* Note: All fields are mandatory and should not exceed 200 word					
	1. IP S	Status				
1.1 Details of Background IP generated so far and possibility of generating new IP through this proje	ct					
1.2 Countries/jurisdiction where the applicant intends to practice/market the proposed technology						
1.3 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 Numbe	Add Remove er Patent Title			
1.4 How Would The Present Proposal Be Able To Counter The Above Restrictions?						
1.5 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?						
2.In Case The Technology Is Licenced From Abroad, Status Of Independent Validation In The Country Is To Be Provided Clearly						
3.1. Regulatory Approvals and Protocols	Select	Regulatory Approvals	Status Approvals obtained/ Approvals in process/ Applications yet to be submitted to the concerned authorities			

3.2.B. Protocols: Protocol in the prescribed format required by the concerned agency for giving approvals





If you don't want to save this form now. You save it next time with modification.

Step 11: Regulatory Details

	Regulato	ry Details	
DCGI Approval Yes	No		
If you click on "Yes" the following f Upload Browse DCGI Approval related file. Details (if not applicable, fill NA)	Diowse	it is in PDF format.	
•		0	
RCGM & GEAC Approval Yes	No		
If you click on "Yes" the following fi	ield are app	peared.	
Upload	Browse		
Browse RCGMApproval related file	. Make sure	e it is in PDF format.	
Details (if not applicable, fill NA)			
National Biodiversity ApprovalYes	• No	0	
If you click on "Yes" the following f	ield are app	peared.	
Upload	Browse		

Browse related file. Make sure it is	in PDF format.
Details (if not applicable, fill NA)	
Pollution Control Board Approval	• O 'es No
If you click on "Yes" the following f	ield are appeared.
Upload	Browse
Browse related file. Make sure it is	in PDF format.
Details (if not applicable, fill NA)	
Any other ApprovalYes No	• 0
If you click on "Yes" the following f	ield are appeared.
Upload	Browse
Browse related file. Make sure it is	in PDF format.
Details (if not applicable, fill NA)	
Save	
Reset ds.	
Cancel the form.	

Step 12: Proposal Objective and Timelines

PROPOSAL OBJECTIVES & WORKPLAN

- * Please indicate overlap of any objective funded by any other funding agency/ (ies). Kindly provide disclosure amendments.
- * Indicate how each objective is exempted for Service Tax, in case exemption is desired.

Objective	Methodology/Experimental Design Detailed Work Plan	Alternate Strategies	Process Indicator for Measuring Success

Fill all the necessary fields.



Step 13: Objective Wise Activities & Timelines

Objective Wise Activities & Timelines

Note: Please Select and Remove Unused Rows

This form appeared you if you filled the previous form "SPECIFIC PROJECT PLAN AND DELIVERABLES".

Select	Activities	Month of Ob	Month of jective: Te	Indicators Strobjectiv	Role of /Aca demia(Please	Role of Partner			
		Activity	Activity	Progress	enter details)				
		0							
Add More Remove									
Please enter 1 st Milestone under 2 nd Objective :									
S. No	Milest	tone		f Start of ivity	Month of End	of Activity			
1.			(-					

Objective: Test objective 2

Select Activities Month of Mo	h of Indicators	Role of	Role of
-------------------------------	-----------------	---------	---------

	Start of Activity	End of Activity	Of Progress	Academia(Please enter details)	Partner
	0				

Please	enter 2 nd Milestone under 2 nd	Objective :	
S. No	Milestone	Month of Start of Activity	Month of End of Activity
2.			

Fill all the necessary fields.



Quarterly Timelines/Minimum Work Programme/Milestones for Quantifiable Outputs Upload Chart: Save Cancel Step 15: Proposal Milestones Browse Proposal Milestones

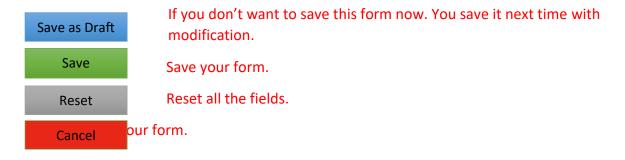
Note: - Please Select At least 3 Activities as Monitor able

Milestones for Release of Instalments.

S. No	Milestones	Month of End of Activity	Description
*1.		NA	NA
* 2.		NA	
*3.		NA	
*4.		NA	
*5.		NA	

Fill all the mandatory details.

Before "Save" the form you have to click "Select/Update Milestone" button.



Step 16: Budget Justification (Available)

Available Equipment Details

	Details of Equipment Available for th	is i roject with Applicant				
Note: Plea	se select and remove unused rows.					
Select	Name of Equipment	Units				
Fill all the mandatory details. Add More Remove						
Det	ails of Equipment Available for this P	Project with Collaborators(s)				
	ails of Equipment Available for this Porator Name	Project with Collaborators(s) Institutions				
	orator Name					
Collab		Institutions				
Collab	orator Name	Institutions				
Collab	orator Name	Institutions				
Collab	orator Name	Institutions				

Fill all the mandatory details.

Add More

Remove

							21		
	as Draft	If you don modificati	't want to save t on.	this form now.	You save it nex	ct time with			
Re	eset <mark>ds</mark> .								
Ca	ncel ·								
Step 1	3: Proposed	l							
	Р	roposed l	Equipment's &	& Accessorie	s Details				
Details of Equipment Proposed To Be Acquired Through BIRAC									
			N	lote: Please se	lect and remov	e unused rov	vs.		
Select	Infrastructure/	Equipment	Capacity	Quantity	Specific Requirement in the Project	Total Estimated Value			

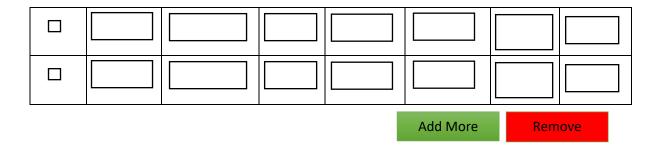
			•	Requirement in the Project	Estimated Value (Rs. In Lakh)	
Total *						
				Add More	Remove	
Accessories to Be Acquired (Rs in Lakh)						

Step 14: Details of Manpower (Available)

Manpower Details Available

Manpower (Scientific and Technical) Already with Applicant Who Will Work In this Project

Note: P	lease select	and remove ur	nused row	s.			
Select	Name	Qualification	Age (In Years)	Full Time/Part Time (Specify hours Per Day)	Experience (In Year)	Role In The Project	Position
					Add Mo	ore	Remove
Manı	oower (Scientif	ic and Technical) A	lready Availa	ble With Collal	borators(s) Who	Will Work In	This Project
		Colla	aborator N	lame (Institu	utions)		
Select	Name	Qualification	Age (In Years)	Full Time/Part Time (Specify hours Per Day)	Experience (In Year)	Role In The Project	Position



Fill all the mandatory fields.



If you don't want to save this form now. You save it next time with modification.

Step 15: Details of Manpower (To be hired)

Manpower Details to be hired

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

Note: Please select and remove unused rows.

Select	Position	No. of	Minimum	Experience	Age	Duratio	Role in	Proposed	Total
		Position	Qualification	(In Year)	Limit, if	n For	the	Annual	Cost
					any (In	Which	Project	Salary	
					Years)	To be		(Rs. In	
						hired		Lakh)	
						(in			
						Years)			
	1	ı	ı		ı	I			

Fill all the mandatory fields.

Remove

Add More

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

Select	Position	No. of Position	Minimum Qualification	Experience (In Year)	Age Limit, if any (In Years)	Duratio n For Which To be hired (in Years)	Role in the Project	Proposed Annual Salary (Rs. In Lakh)	Total Cost

Remove

Add More

Manpower (scientific and technical) to be hired for the project through BIRAC Contribution for Collaborators

Select	Position	No. of	Collaborator	Minimum	Experience	Age	Duratio	Role in	Proposed	Total
		Position	s Where	Qualification	(In Year)	Limit, if	n For	the	Annual	Cost
			Manpower			any (In	Which	Project	Salary	
			Is To Be			Years)	To be		(Rs. In	
			Positioned				hired		Lakh)	
							(in			
							Years)			
			Select							
			Select							
			Select							
			Select							
			Select							

Save as Draft	If you don't want to save this form now. You save it next time with modification.
Save	
Reset	ds.
Cancel	

Step 16: Details of Manpower (Consumable Details)

			Note:	Please select and r	remove unused rows
Select	Items	Quantity	Units (e.g. g/ml etc.)	Approximate Cost (Rs. In Lakhs)	Justification for the Requirement
	•	•	•	•	

Consumable Details

Through Applicant / BIRAC Contribution for Applicant

Total	Amount	Rea	uired	For	Consuma	ble
	,					~.~

0.00

Through BIRAC Contribution For Collaborators(s)

Select	Items	Quantity	Units (e.g. g/ml etc.)	Approximate Cost (Rs. In Lakhs)	Justification for the Requirement	Collaborators
						Select
						Select
						Select
						Select
						Select
Fill all t	he mandato	ory fields.	Add More	Remove		

Total Amount Required For Consumable

0.00

Save as Draft

If you don't want to save this form now. You save it next time with modification.

Save

Reset ds.

Cancel

Step 17: Details of Manpower (Justification for Other Recurring Heads)

Justification for Other Recurring Heads

Through Applicant / BIRAC Contribution for Applicant

Travel Cost	Travel	Contingency Cost	Contingency	Overhead	Overhead
(Rs. In Lakh)	Justification	(Rs. In Lakhs)	Justification	Cost	Justification

$Through\ BIRAC\ Contribution\ for\ Collaborators(s)$

Collaborators(s)	Travel Cost (Rs. In Lakh)	Travel Justification	Contingency Cost (Rs. In Lakhs)	Contingency Justification	Overhead Cost	Overhead Justification
Name of the Collaborators						

Fill all the mandatory fields.

Save as Draft	
Save	

If you don't want to save this form now. You save it next time with modification.

Reset de Cancel

Step 18: Details of Manpower (Details on Work to be outsourced)

Details on Work to be outsourced

Note: Please select and remove unused rows.

Select	Work Proposed	Name of the	Whether The Applicant has	Estimated Cost
	То Ве	Institute/Organization to	Already Signed any Contract	Involved In (Rs.
	Outsourced	Whom it is Proposed to be	With this	In Lakhs)
		Outsourced	Institution/Organization	

Total

0.00

Add More Remove

% of Contribution By The Applicant of the above Total Cost:						
Contribution By the Applicant	t:	0.00				
Support Requested from BIRA Fill all the mandatory fields		0.00				
Save as Drait	u don't want to save this form ification.	n now. You save it next time with				
Cancel						

Step 19: Details of Manpower (Other Financial Details)

Other Financial Details

1.					_		d/Requested/Committed		
	Proposed Study	. Pleas	e include (GO۱	vernment	, Private,	International Any Othe	r Soui	rce

2.	Applicant 1	Γο Car	ed So Far/Approved By Any Of The Government Agencies To The ry Out Any Other Activity During The Last Five Years(Give Details Like ount Received/Approved, Funding Agency And Status Of The Project)
	Save as Draft		If you don't want to save this form now. You save it next time with modification.
	Save		
	Reset	ds.	
	Canaal	.	

Step 20:BUDGET DETAILS OF THE APPLICANT INSTITUTE

Non Recurring Cost (Rs in Lakhs)

Name of Applicant: ABC Collaborator Type -Institutions

Equipment (A)	Accessories (B)	Total (A+B)	Total Support requested from BIRAC (Rs in. Lakhs))	
0.00	0.00	0.00	0.00	
Grant-In-Aid				

B. Recurring Cost (RS in Lakhs)

Manpow er (A)	Consumables (B)	Travel	Contingency	Total (A+B+C+D)	Total Support requested from BIRAC (Rs in. Lakhs))
0.00	0.00	0.00	0.00	0.00	0.00
Grant-In-A	id	0.00	0.00		

You just need to review the calculation and save the form.

Save Cancel ·

Step 21:BUDGET DETAILS OF THE COLLABORATOR

Non Recurring Cost (Rs in Lakhs)

Name of Applicant: ABC Collaborator Type -Institutions

Equipment	Accessories	Total	Total Support requested from BIRAC (Rs in. Lakhs))	
(A)	(B)	(A+B)		
0.00	0.00	0.00	0.00	

B. Recurring Cost (RS in Lakhs)

Manpo wer (A)	Consuma bles (B)	Travel (C)	Contingen cy (D)	Overhead Cost(E)	Total (A+B+C+D+ E)	Total Support requested from BIRAC (Rs in. Lakhs))
0.00	0.00	0.00	0.00	0.00	0.00	0.00

You just need to review the calculation and save the form.



Step 22: Details of Manpower (Budget Summary)

Name of Company Test Company Contribution by Applicant and Collaborators Applicant Sub Total (A): 0.00

Support Requested From I	BIRAC :	Grant in Aid	Loan	
Applicant	0.00	0.00	0.00	
Collaborators Name	0.00	0.00	-N.A-	
Sub Total (B):	0.00	0.00	-N.A-	
	0.00			

You just need to review the calculation and verify the form.



Step 23: DECLARATION DOCUMENT

* Please Upload the Declaration Document : Please upload only pdf files



Step 24:Final Submission

Final Submit

- * Review all your forms whom status is "DONE" after review click on "Final Submit" Button.
- * Make sure all the forms has status "DONE", before you click on "Final Submit" Button.