**National Grassroots ICT Research Initiative**

**Final Year Project (FYP) Recommendation Form**

**University/Institute Detail:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of University/Institution |  | | Physical Address: |  |
| Telephone & Fax No: |  | | Discipline: |  |
| City: |  | | Province: |  |
| **Recommended Project Details:-** | |
| Project Supervisor Name and Designation: |  | | Contact Details: | Email:  Cell No  Off No: |
| Project Supervisor Qualification: |  | | No of Publications of Supervisors: |  |
| Students Name(s): | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Students Mobile No: | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Students CGPA | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Students Email: | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Degree Programme/ Title: |  | | Area of Specialization: |  |

**Final Year Project Details:**

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| --- | --- | --- | --- | --- | --- |
| 1. **Project Title:** | | |  | | |
| 1. **Project Start Date:** | | |  | | |
| 1. **Project Finish Date:** | | |  | | |
| 1. **Project Summary (less than 200 words)** | | |  | | |
|  | | | | | |
| 1. **Project Objectives:** | | |  | | |
|  | | | | | |
| 1. **Project Implementation Method** | | |  | | |
|  | | | | | |
| 1. **Key Milestones of the Project with dates** | | |  | | |
| S.No | Elapsed time since start of the project | | Milestone | | Deliverable |
| 1. |  | |  | |  |
| 2. |  | |  | |  |
| 3. |  | |  | |  |
| 4. |  | |  | |  |
| 5. |  | |  | |  |
| Please add rows if required | | | | | |
| 1. **Final Deliverable of the Project:** | | | (Please tick one of the following) | | |
| Hardware System | | Software System | | HW/SW integrated system | |
| Software Simulation results | | Comparative Study | | Theoretical Design/Architecture | |
| Simulator Design | | Other Please specify | |  | |
| 1. **Please Specify Technical Detail of Final Deliverable** | | |  | | |
|  | | | | | |
| 1. **Equipment required for making prototype/working model:** | | | (please indicate in tabular form the required equipments along with estimated cost) | | |
|  | | | | | |
| 1. **Benefits of the Project** | | | (Please specify Direct/Indirect beneficiaries) | | |
|  | | | | | |

1. Name & Signature of Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| 1. Name & Signatures of HOD: |  |