



STUDENT STARTUP AND INNOVATION POLICY (SSIP 2.0)

Call for Application

	<u>Date: / / .</u>
The Student Start-up and Innovation Policy (SSIP 2.0) aim the traditional and new age technology along with the s and green energy, climate change towards achieving Ind will be encouraged.	sunrise sectors. The innovations in clean
As per the provisions of the policy, funding support initiatives to be undertaken at universities, fund is als regarding innovation and entrepreneurship, prototyping efforts.	o provided for sensitisation of students
Government of Gujarat has developed a policy for prov Under this scheme,application of Proof of concept, Prototype, Product and https://www.ssipgujarat.in/datafiles/SSIP_2.0_Education the submission of the application is / / .	is inviting you for the distant-up. For more details, please refer
Head of the department	PoC and IPR Committee member
Copy to	

- 1. Provost
- 2. Registrar
- 3. Institutions SSIP Coordinator





Project Title:

In context to above mentioned project title and submitted proposal following observations and recommendations are made.

- 1. Proposed work falls in aim and scope of SSIP and hence can be considered.
- 2. Need of equipment/consumable items/ raw material/ minor works/ professional services and other mentioned are rational and required.
- 3. Additional observations if any

PoC and IPR Committee Recommendation

The project is recommended to be considered under SSIP with title of ______. Department SSIP committee will undertake regular review of work and update authorities as necessary. Following students are

Sr. No	Student Name	Enrollment Number	Sign

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Name and Signature of Head of the Department

1.

Name and Signature of PoC and IPR Committee member

1.



8. Approximate Project Cost:



DU/SSIP/POC/04

Application for Financial Assistance Under SSIP

Part-1 General Information

1. 1	1. Title of Innovation:							
2. F	2. Field of Innovation:							
3. 1	Name	e of the Department:						
			art with Team Leader):	T	T =			
Sr.	Nan	ne	Enrollment No.	Sem.	Email	Phone		
No. 1								
2								
3								
4								
5. [Detai	ls of Faculty Guide:		•				
Sr. N		Name	Department	Email		Phone		
1								
				l				
6. [Detai	ls of Internal/Externa	ll Mentor (if any):					
Sr. N		Name	Designation &	Email		Phone		
			Association					
1								
			,			•		
7. /	Appro	oximate Duration of F	Project:					





Part-2 Project Detail

- 1. Type of Proposal (PoC/Prototype/IPR):
- 2. Abstract:
- 3. Project Status: Idea to Prototype/ Prototype to Product/ Product to Market
- 4. Review of Existing Solution to the Problem, if any, and their Limitations:
- 5. Innovative Solution Proposed in this Project:
- 6. Outline of System Architecture and Science & Technology Involved in this Project:
- 7. Work Plan giving Stepwise Activities and Sub-Activities to achieve Project Objective:
- 8. Expected Outcome of the Project:
- 9. Specify if Project can be considered for filing Patent or other IP:

(Attach Patent Art Search Report (PASR))

10. Summary of Estimated Project Cost:

Sr. No.	Details	Cost	Remarks
1	Equipment		Annexure-I
2	Raw material and Consumables		Annexure-II
3	Professional Services		Annexure-III
	Total		

P	റ	and	IPR	Committe	e mem	her

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For Office Use only

Project Title:

Project ID:

- 1) Name of Department:
- 2) Name of PoC and IPR Committee member:





Sr. No.	Equipment Requ	Approximate			
	Description	Quantity required	Rate per Quantity	expenditure	Justification
		Total Exp	enditure		

PoC and IPR Committee member





Sr.	Consumable items Requ	Approximate			
No.	Description	Quantity required	Rate per Quantity		Justification
		Total Ex	 penditure		

PoC and IPR Committee member





Sr.	Professional Services		
No.	Description	Approximate expenditure	Justification
	Total Expenditure		

Poc and IPR Committee member





Certificate From the Student(S)

Project Title:

3

4.

- 1. I/We agree to abide by terms and conditions of the SSIP guidelines.
- 2. I/We did not submit this or a similar project proposal elsewhere for financial support.
- 3. I/We agree to submit the project on completion of event.
- 4. I/We understand that reimbursement of any expenditures made is subject to production of original bills issued by firm/agency/shop possessing CST/VAT/TIN/GST and other as applicable. Financial aid under SSIP is only at a reasonable level to enable students to carry out the project.

Date:Name and Signature of Student(s)1.2





Certificate from the PoC and IPR Committee member and Mentor

Project Title:

2.

In context to above mentioned project title and submitted proposal this is to certify that

- 1. Activity proposed is justifiable.
- 2. Approximate expenditure, with mentioned break up, is rational and required for conduction of activity.
- 3. Requirement of equipment/consumable items/ raw material/ minor works/ professional services and others as mentioned are required for effective and successful implementation of this project and hence recommended.
- 4. Process of expenditure will be carried out as per SSIP financial guidelines.
- 5. Approximate expenditure to conduct this activity is Rs. ______.

Date:Name and Signature of PoC and IPR Committee member1.Name and Signature of Mentor1.





Submitted to Educational Institutions Head

With due respect, I would like to state that the permission may please be granted for the following purchase under SSIP.

❖ Purpose of Purchase (Put tick mark against activity & give details):

1	Purchase for development of prototype/PoC of project selected under SSIP	
	Project Title:	
	Project ID:	
	Name of Team leader:	
	Name of faculty guide:	
2	Availing professional service for project selected under SSIP	
	Project Title:	
	Project ID:	
	Name of Team leader:	
	Name of faculty guide:	

Details of Equipment/Items to be purchased:

Sr. No.	Item (Model no. with main specification)	Supplier	Qty.	Price per Item (Rs.)	Total Cost (Rs.)

❖ Details of Consumables to be purchased:

Sr. No.	Item (with main specification)	Supplier	Qty.	Price per Item (Rs.)	Total Cost (Rs.)





Details of Professional Services Required:

Sr. No.	Professional Service	Agency	Total Cost (Rs.)

List of Document attached.

- Comparative statements of quotations received from minimum three suppliers. If three
 quotations are not possible due to nature of equipment/item due justification about the
 same.
- 2. Copy of quotations and/or supporting documents.

Certificate

- Purchase proposal has been prepared after satisfactory survey of market and as per prevailing norms of SSIP.
- 2. Price/rates quoted are rational and not more than prevailing rates in the market to best of our knowledge.

Date:

Signature of PoC and IPR Committee member Signature of SSIP Co-Ordinator (To be filled by Institute SSIP Committee) Date:

- 1. Approval Form Number: DU/SSIP/PoC/Year/Purchase/_____.
- 2. Necessary permissions are granted/not granted for the above purchase according to the prevailing applicable norms of SSIP.
- 3. The process of purchase may be initiated.





Expenditure up to Rs. 50,000/-	Educational Institutions Head
	Educational Institutions Head
Expenditure more than Rs 50,000/-	Academic Expert
& less than Rs. 200,000/-	Technical Expert
	Institutions SSIP Coordinator





10,		
Supp	lier Name	
Supp	lier Address	
Tel:		
	Sub: Quotation for	, as per the specifications.
Sir,		

With respect to SSIP policy grant, the following are the list of items required for purchase. Kindly send your quotations for the items below,

Sr. No.	ltem	Specification	Quantity	Notes
1				
2				
3				
4				
5				

The prices should be inclusive of all taxes including GST. You're requested to provide your GST number, bank name, bank a/c number and IFSC code along with your quotation. This office reserves the right to reject supplied materials.

Date:	
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Head of the Department

PoC and IPR Committee member





Project Title:
Project ID:
Department:

Sr. No.	Items	Name of Supplier 1 Quote	Name of Supplier 2 Quote	Name of Supplier 3 Quote	Name of L1 supplier
1					
2					
3					
4					
5					

reminesion may be picace given to paremace item no: to, mem the capplicie in quotea ra	Permission may be please given to purchase item no	to, from the suppliers L1 quoted r	ate
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Head of the department

PoC and IPR Committee member

Attachment:

1. Quotation of all vendors





	Date:
Purchase Approval Form Number: DU/SSIP/PoC/Year/Payment/ Purpose of Purchase: For Ongoing SSIP project.	
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In reference to the above-mentioned purchase approval form disbursement as be following details are passed under SSIP.

Sr.No.	Name of agency/authorized person in whose favour payment is to be made	Amount	Mode of payment cash/chque	Remarks
	Total			

Passed for Payment of Rs. _____/- (only)

Above expenditure has to be accounted under following head of SSIP.

Sr.No.	Expenditure Head	Amount from SSIP Grant	Amount from Institute	Total Amount
1	PoCs / Prototype / Innovation			
2	IP Support	NA	NA	NA
3	Tinkering lab development, infra structure, administration, programs/ pedagogical interventions, events, special endeavors, setting up pre* incubation/incubation centers, basic infrastructure, and others (Max. 30% of Sr. 3 above)	NA	NA	NA

Date:/	Name & Sign of Educational Institutions Head
	(Provost-Darshan University)