

Department of S.Cs,O.B.C. & Minority Affairs,
Himachal Pradesh, Shimla -09

Proposal for conducting research in the field of Disability.

Proposals are invited from the Universities, Organizations, Institutions of higher learning, Professional, Non-Governmental Research units under the “Integrated scheme for Persons with Disabilities”- “ SAHYOG” for conducting research in following areas:-

- To understand the causes of occurrence of disabilities.
- Prevention of Disability.
- Early detection of disability.
- Development of assistive devices including their psycho-social aspects.
- Job identification in private sector.
- On site modification in public and private premises.

The proposal is to be submitted through concerned Deputy Commissioner on prescribed format which is available on the departmental website www.himachal.nic.in/welfare/ office of District Welfare Officer of the concerned district.

The desired NGO/Institution should have an experience and expertise in the field of disability for a minimum period of three years or should have done research in disability sector and should have appropriate and adequate infrastructure, manpower and assets for the research work. It must be ensured that the proposal should be detailed and clearly depict its monitor able outcomes. The project cost of the proposal should be upto ` 2.00 lacs.

Last date for the receipt of proposal is 10-11-2011.

Director,
Deptt. of S.Cs. O.B.Cs. & Minority Affairs ,
cum
Joint Commissioner (Disabilities),
Himachal Pradesh, Shimla-09.

Application to undertake Research Project in the field of Disability

1. Year:-
2. Name of Organization:-
3. Postal address with telephone number of Organization:-
Email address, if any
4. Whether Government/ Public /Private Sector Undertaking :-
5. Whether Organization registered under any Act.
6. Date of registration:-
(Enclose copy)
7. Field in which organization is working :-
 - a) -----
 - b) -----
 - c) -----
8. Detail of Research Projects undertaken so far:-
 - a)
 - b)
 - c)
9. Whether grant received from Govt. If so, give detail
 - a) State Govt. -----
 - b) Central Govt.-----
 - c) Other sources.-----
10. Detail of the Project Proposal:-
11. Any other information:-

Signature (with seal) -----

Name -----

Date-----

Recommendation of Deputy Commissioner-cum- Deputy Commissioner (Disability).

Deputy Commissioner

-cum-

Deputy Commissioner (Disability)