



Office of Research Innovation and Commercialization (ORIC)

University of Management and Technology Lahore

FUNDED/APPLIED RESEARCH AWARD CLAIM FORM

For Official Use Only:

Date:

Reference no.

PROJECT INFORMATION

Title of Funded Research Project (please enclose all related documents): _____

Project Number (if any): _____ **Funding Agency:** _____ **Funded Amount:** _____

PRINCIPAL INVESTIGATOR (PI) DETAILS

PI Name: _____ **Employee Code:** _____

Designation: _____ **Department:** _____

School/Institute: _____ **Campus:** _____

Cell: _____ **Email:** _____ **Office Ext.:** _____

Other Investigator(s) (If any):

1) _____ 2) _____ 3) _____

CLAIMED AMOUNT

Claimed Amount: _____

Brief summary of project: _____

Principal Investigator Signature:

Name: _____

Signature: _____

Date: _____

