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#

Research Institute for Astronomy and Astrophysics of Maragha#

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Research Project Questionnaire#

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Date of Filling out:

Date of Approval: #

#

Please include your research project application, a copy of your employment certificate and your colleagues' to the form. #

Research Program

Title of Project # ##	#
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This section would be completed after official approval.

Date of Project Performing #	From	till	for	months
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Place of Project Performing #	# #
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Research Fee #	Full Name #	Scientific Degree #	Working Hours (in month) #	Working Time #	Research Fee per Hour #
Administrator and other Faculty Members #	1-	#	#	#	#
	2-				
	3-				
	4-				
	5-				
	6- #				

Fees #	Full Name #	Evidence #	Working Hours (in Month) #	Working Time #	Fees per Hour #
Non-Faculty Member Colleagues #	1-	#	#	#	#
	2-				
	3-				
	4-				
	5-				
	6- #				

Please, classify the functions of administrator and colleagues overleaf.#

Administrative Program- A list of necessary equipment's

Phase#	Details of Phase#	Date of Beginning#	Necessary Time (in month)#
#	#	#	#

Necessary Equipment's #

Class#	Qualifications of Machine#	Approximate Expense#	Any University, research institute or executive organization from which we can borrow the needed equipment's.#
#	#	#	#
#	#	#	#
#	#	#	#
#	#	#	#
#	#	#	#
#	#	#	#
#	#	#	#
#	#	#	#

Total:#

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Trips - Invited Colleague Researchers

Would you travel anywhere? Please include the necessary information about the visa, the country, ..., and any other costs. Are the costs of your travels supplied partly by another source?#

#

Any other suggested travels during this calendar year (Please, mention to financial supporter.):#

#

Include the names and scientific records of researchers who would accompany you in year .
When would they join you? How long? Please mention any other expenses such as cost of trip, research fee,... . The final approval of your project is due to sending thorough information of every invitee's biography.

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Signature of offerer:

Date:#

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With due attention to referee's opinion and research records of offerer and

This project is approved in session of scientific council of RIAAM.#

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Proposal Form

Expenses

7

Total#

Research Fee#	Administrator#	#	#
	Colleague 1#	#	
	Colleague 2#	#	
	Colleague 3#	#	
	Colleague 4#	#	

Fees#	Ph.D.#	#	#
	M.S.#	#	
	B.S.#	#	
	Student#	#	
	etc.#	#	

Equipment's#	Consumable#	#	#
	Inconsumable#	#	

Travels#	Interior#	#	#
	Foreign#	#	

Invitatory Researchers#	#	#	#
			#
			#

Other Expenses#	#	#	#
	#	#	
	#	#	
	#	#	

Total Expenses#	#
	#
	#