

Dr. Mahalingam College of Engineering and Technology, Pollachi-642 003

(An Autonomous Institution)

**Research Contingency
Grant - FORM 3**

Office of Dean – Research & Innovation

MCET Research Contingency Grant –Utilization Certificate

Date:

Title of the Project	:	
Reference No. & Date	:	
Name and designation of the Faculty received Contingency grant	:	
Name of the Department	:	
Amount requested (Rs.)	:	
Amount spent(Rs.)	:	
Details of balance amount (if any)	:	
Paper publication detail (Attach 1 st Page of research paper)	:	Q1 SCIE Scopus Total:
DOI of the published papers	:	DoI of Paper 1: DoI of Paper 2: Etc.,
Attach Form 1 and Form 2		

CERTIFICATE

Certified that the contingency grant of Rs. _____(in words)
was received from the MCET management during the financial year _____under the scheme
MCET Research Contingency grant entitled “_____”
vide MCET Ref.No.,_____, dated_____, an amount of Rs.____has been
fully utilized for the purpose for which it was sanctioned and in accordance with the terms and conditions
laid down by MCET and publication raised out of grant has been acknowledged.

Signature of Faculty Incharge

R&I Coordinator

HoD

Accounts Manager

Approvals

Dean R&I

Vice Principal

Principal & Joint Secretary