

**KERALA STATE COUNCIL FOR SCIENCE, TECHNOLOGY AND ENVIRONMENT
WOMEN SCIENTISTS DIVISION**

BACK TO LAB PROGRAMME

Date of start intimation form

1. Project Reference No:
2. Name and Address of the Woman Scientist (Include Telephone, Mob., Fax and e-mail ID)
3. Name and Address of the Scientist Mentor (Include Telephone, Mob., Fax and E-mail ID)
4. Title of the project:
5. Project duration and total outlay :
6. Sanction Order No. and date :
7. Date of cheque/draft received :
8. Date of start of the Project:
9. Due date of completion of the project:

Name and Signature:

Woman Scientist

Scientist Mentor

Date:

Place:
