



## Ahsanullah University of Science and Technology Research and Publication Office (RPO)

### AUST Internal Research Grant (AIRG)

## BUDGET REQUEST FORM

All funded researchers are required to complete this form to have their funds released.

Section A – Account Details		
Principal Investigator	IUMS ID:	
	Name:	
	Mobile:	
	Designation and Department:	
Co-investigator(s)	IUMS ID:	
	Name:	
	Designation and Department:	
Project ID		
Project Title		
Approved amount of grant		
Budget period		
Grant release installment	<input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup>	
Amount of fund requested	Amount: .....  In words: .....	
<b>Previous Withdrawal / Expenditure Information</b>		
<i>other than for the 1<sup>st</sup> installment please filled-out the table below:</i>		
Installment	Withdrawal Amount	Expenditure Amount
1 <sup>st</sup> Installment		
2 <sup>nd</sup> Installment		

### Section B –Document to be attached

A copy of the award notification is attached: ☐ Yes ☐ No

#### Agreement and Signature

By signing and submitting this Request for Release of Funds, I agree to the following points:

1. that I am responsible for all transactions on this account, will review them on a timely basis and will report any errors or omissions as soon as possible;
2. that all charges authorized against funds conform to the allowable expenditures and limits stated within the approved budget as well as ensuring compliance with the terms and conditions of AIRG and that charges will also comply with the approved budget, AIRG Terms and Conditions, and AUST policies;
3. that I am responsible for the completion and submission of all required reports (financial and non-financial) where required/applicable;
4. that noncompliance may result in a freezing of the project funds and that no expenditures made during this time will be reimbursed. No other reimbursement requests for expenditures prior to funds being frozen will be processed until the compliance issue has been resolved.

Date:

*Signature of the PI*

#### For Office Use Only

Recommendation of the Director, RPO:

Date:

*Signature of the Director, RPO*

Recommendation of the Chairman, RPC:

Date:

*Signature of the Chairman, RPC*

#### Approval of the Treasurer

☐ Release of funds approved

☐ Release of funds not approved

Date:

*Signature of the Treasurer*