

Project Code	
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KEMENTERIAN PENGAJIAN TINGGI

PPRN GRANT APPLICATION FORM

One (1) hardcopy and softcopy (email: pprn@mohe.gov.my and pprn.kpt@gmail.com) of this form must be submitted to the Research and PPRN Unit, Policy Planning and Research Division, Ministry of Higher Education

[Incomplete Application will not be considered]

PROJECT TITLE:
A. DETAILS OF RESEARCHER
Name of Project Leader:
Designation:
Office Telephone No: Mobile No:
E-mail Address:
Mailing Address:
Name of Institute of Higher Education / Public Research Institute :

B. COMPANY INFORMATION

Company Name:

Company Contact Person:

Phone No:

Email:

Company Address:

Company Registration Number(MyCoID):

Business Premise Registration Number (Local Authority / Authorised Government Agency):

Brief Description of Company:

Employees Information

Total Number of Employees:	<input type="text"/>
Malaysian Citizen Employees:	<input type="text"/>
Non Malaysian Citizens Employees:	<input type="text"/>

Sales Information

Sales turn over in the last 3 years (in Ringgit Malaysia):

Year: _____ Year: _____ Year: _____

Quantity and Sales of the product / services related to this project in for the past 12 months:

Quantity: Sales:

Expected turnover of the product / services related to this project after receiving PPRN grant:

Quantity: Sales:

Size of Company

Micro	<input type="text"/>
Small	<input type="text"/>
Medium	<input type="text"/>
Large	<input type="text"/>

(refer to Garis Panduan Pelaksanaan Public-Private Research Network 2.0 to determine company size)

Industry Sector (Please cross one of the following options):

Manufacturing

Agriculture

Services

Mining

Construction

Type of Business Ownership (Please cross one of the following options):

Enterprise

Partnership

Private Limited

Limited Liability

Has the company been assessed by any Government/State Agency (e.g. SCORE SME Corp Malaysia etc.): (Please cross one of the following options)

No

(please fill in the Business Model details in the following page)

Yes

If Yes, please state all the Agencies and the year assessed:

1.

2.

3.

Has the company received any grant or other financial or non-financial assistance related to the project from any Government/State Agency in the last 3 years e.g. PPRN, MOSTI, MTDC, SMECorp, TEKUN, PUNB, MARA, CREST, SIRIM, MDEC (***Please state the information in detail, including the Agency involved, title and scope of grants, amount received and year:***)

Future state of the company:
(Please briefly describe how do you see your business in the near future)

Company Performance Evaluation:
(Please attached related supporting documents as a proof that the company has been evaluated on their performance)

Business Model Canvas:

Please attached the Business Model Canvas for company that has not been evaluated in terms of their performance by agency such as SME Corp, PUNB, MTDC, SIRIM, MARA, MDEC, MIGHT and other related agencies). Example of Business Model Canvas can be downloaded at https://canvanizer.com/downloads/business_model_canvas_poster.pdf

Company's needs in the project:
(Please briefly describe the current status of the company's production and its process. What are the limitations and solutions needed)

C.	INSTITUTION INFORMATION
Name of Institute of Higher Education (IHE) / Public Research Institute (PRI):	
Address:	
Brief description of the Institute:	
Institute's role in the project:	

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D. RESEARCH TEAM MEMBERS:

No.	Name	IHE / PRI	Highest Academic Qualification / Area of Expertise	Email address and H/P number	Role and responsibility	Signature
1	(Project Leader)					
2						
3						
4						
5						
6						
7						
8						

Note:

Please provide a **one-page** Curriculum Vitae for all team members

A large, empty rectangular box with a thin black border, occupying the upper half of the page. This area is typically used for providing a detailed description of the grant application or for attaching supporting documents.

E	INFORMATION ON THE PROPOSED PROJECT
Title of the proposed project:	
Project Duration(months): _____ *Maximum of 6 months for micro sized company **Maximum of 12 months for small, medium and large company Gantt Chart of Project Activities including Milestones and Dates: <i>(please enclose in Appendix as appropriate)</i>	

F	DETAILED INFORMATION ON THE PROPOSED PROJECT
<p>Executive Summary of the Proposed Project (maximum 300 words) (Please include the background of the problem faced by the company, objectives of this project, proposed solution and expected outcomes)</p>	

Scope of PPRN Project (Please tick X)

Product Innovation

Process

Innovation

Briefly describe what is the specific product/process to be innovated or upgraded in this proposal? (maximum 100 words)

Briefly describe what is the scientific and technological solution that can be offered by the researcher/s to solve this problem. (maximum 100 words)

Project Background (including Problem Statement)

(Please enclose in the Appendix as appropriate)

Objective(s) of the Proposed Project

The implementation of the proposed project is *(please cross the appropriate box(es))*:

To increase efficiency *(please state details)*:

To reduce process time *(please state details)*:

To improve quality *(please state details)*:

To increase revenue *(please state details)*:

To reduce manpower *(please state details)*:

Please describe Details of the Proposed Solution (design, formulation, concept, specification, flow chart and suitability with company)
(Please enclose in the Appendix as appropriate)

Risk Plan (Time, Financial, Technical, etc)

Rank	Risk Statement	Risk Level	Risk Response
1			
2			
3			
4			

Expected deliverables:

New or improved Product or Process (with manual, commissioning and training)

(Please enclose in the Appendix as appropriate)

G	BUDGET	
Indicate your estimated budget for the proposed project in the table below and provide detailed information for each Vot (in an Appendix as appropriate):		
CATEGORY	PROPOSED FUNDING (RM)	
	PPRN	COMPANY
Vot 11000 Salary and Wages		
Vot 21000 Travelling and Transportation (maximum of RM5,000)		
Vot 24000 Rental <ul style="list-style-type: none"> • only applicable for rental of external facilities/equipment. • maximum of 10% total project cost or maximum of RM15,000 (whichever lower). 		
Vot 27000 Materials and Supplies		
Vot 28000 Maintenance and Minor Repair Services <ul style="list-style-type: none"> • maximum of 2.5% total project cost or maximum of RM10,000 (which ever lower). 		
Vot 29000 Professional Services <ul style="list-style-type: none"> • Researcher's professional fees • Testing/Instrumentation/Characterization • Fabrication work 		
Vot 35000 Accessories and Equipment (attached quotation) <ul style="list-style-type: none"> • Not more than 40% of the total PPRN funding 		
TOTAL		
Administration Fees (5%)		
GRAND TOTAL		

Note: Evidence of item pricing must be provided for Vot 24000,27000,28000,29000 and 35000 (e.g Quotation or Price list from Manufacturer/Vendor website, etc)

H	ADDITIONAL CONTRIBUTION BY THE COMPANY
	List of additional contribution that company is willing to offer (e.g industrial training for students, Training of Trainers (ToT) to local industries, job offers for student's involved in the project, etc)
I	ADDITIONAL APPROVAL
	Does the research team require approval from a particular Agency / Committee such as Malaysia Nuclear Agency, Institutional Biosafety Committee, Ethics Committee, etc regarding specific requirements or aspects about this project? <i>(If yes, please describe the need to gain the approval and attach the prove of approval)</i>
J	DECLARATION BY APPLICANTS (Please cross ☒):
	<p>I hereby declare that:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All information stated in this form is accurate and the Ministry of Higher Education and Project Management Centre has the right to reject or to cancel the application without prior notice if there is any inaccurate information given. <input type="checkbox"/> No conflict of interest exists between the Institute of Higher Education / Public Research Institute, Lead Researcher or any other team members in the research team and the Company involved in this proposed project. <input type="checkbox"/> The Lead Researcher or any other team members in the research team and the Company involved in this project have not made application with similar scope to other grant/fund providers. <p>Date :</p> <p>_____</p> <p>(Name of Company's Representative) (Name of Lead Researcher)</p> <p>(Company's Stamp) (Institution's Stamp)</p>

	Recommended by Director of Project Management Centre (PMC)
	Please tick (✓)
	Recommended:
	<input type="checkbox"/> A. Approved for Submission
	<input type="checkbox"/> B. Rejected (Please specify reason)
	Comments:

	Name:
	Signature:
	Date:

Note:

All applications submitted will be treated in full confidence. The award decision by Ministry of Higher Education is final.

CHECKLIST FOR PPRN GRANT APPLICATION FORM

(Please cross)

- | | | |
|-----|--|--------------------------|
| 1) | One (1) set of hardcopy PPRN Grant Application Form | <input type="checkbox"/> |
| 2) | One (1) set of softcopy PPRN Grant Application Form | <input type="checkbox"/> |
| 3) | Letter of Support signed by Company's top management | <input type="checkbox"/> |
| 4) | One-page Curriculum Vitae for every researcher | <input type="checkbox"/> |
| 5) | Company's yearly sales turnover is RM100,000 and above | <input type="checkbox"/> |
| 6) | Copy of company's registration certificate with SSM or equivalent | <input type="checkbox"/> |
| 7) | Copy of related documents to show the performance of the company had been evaluated by agencies or platform | <input type="checkbox"/> |
| 8) | Copies of latest 3 years full audited account report (Sdn Bhd) or 6 months latest certified Bank statement (Enterprise) | <input type="checkbox"/> |
| 9) | Business model canvas (for companies that has not been evaluated by any agencies/platform) | <input type="checkbox"/> |
| 10) | Project evaluation form by IPT/PRI technical committee | <input type="checkbox"/> |
| 11) | Company Form 24 | <input type="checkbox"/> |
| 12) | Copy of related document to show that additional approval from related Committee/Agency has been received (Item I in the form) | <input type="checkbox"/> |