

## **BOMET UNIVERSITY COLLEGE**

## (A Constituent College of Moi University) Research Innovation and Extension Department

## COLLABORATION/CONSORTIUM EXPRESSION OF INTEREST FORM

This template is meant for institutions/organizations seeking collaboration or intending to form a consortium with Bomet University College for the purpose of Research.

Name of the	
Institution/Organization	
11	
Country	
Institution/	Phone:
Organization contacts	Email address:
	Postal address:
	Postal Code:
	Town:
	Country:
Details of contact person	Phone:
	Email address:
	Postal address:
	Postal Code:
	Town:
	Country:
Important dates	Start for the Study YYYY MM DD
	Deadline for the Study
	YYYY MM DD

Theme of study	1. Food Security			
	2. Natural Resources			
	3. Health & Nutrition			
	4. Environmental Conservation			
	5. Community Development			
	6. Gender			
	7. Education			
	<ul><li>8. Human Resource Development</li><li>9. Socio-Cultural Issues</li><li>10. Entrepreneurship</li><li>11. Legal Issues</li><li>12. Others</li></ul>			
	(specify)			
Brief description of				
research project.				
Expected financial				
Implications to Bomet				
University College				
(USD \$)				
Expected number of				
collaborators and	Number	Gender	Qualification	
qualification	1.			
	2.			
	3.			
	4.			
	5.			