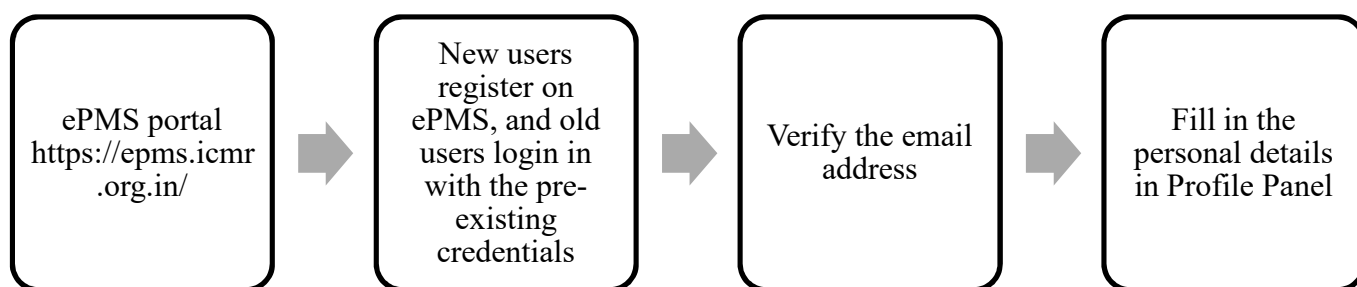


Steps for New User Registration on ICMR ePMS portal for Extramural Research Programme.





भारतीय आयुर्विज्ञान अनुसंधान परिषद
Indian Council of Medical Research
Electronic Project Management System (e-PMS)



Home About Us Guidelines e-PMS Team e-PMS Login Contact Us



ICMR Electronic Project Management System (e-PMS)

ICMR Electronic Project Management System (e-PMS) has been developed to provide user friendly system for online submission of project proposal and related documents and monitor the ongoing projects.

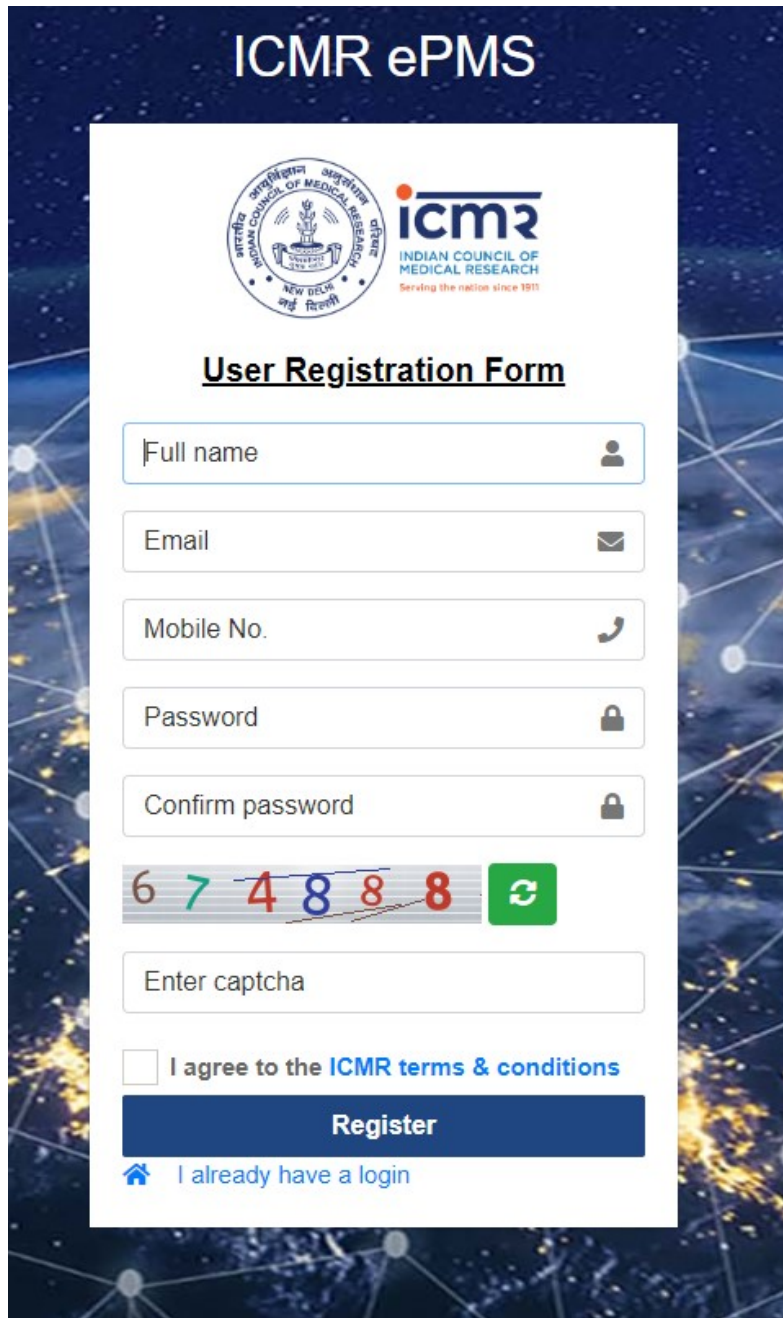
will not accept any new institute or designation details approval within 48 hours prior to the submission deadline. For optimal compatibility, we recommend

[e-PMS Login](#)

Before submitting a proposal on the ICMR ePMS portal, you need to register on <https://epms.icmr.org.in/>.


Click on 'e-PMS Login' to login / register yourself






The image shows a screenshot of the ICMR ePMS User Registration Form. At the top, the ICMR logo and name are displayed. The form includes fields for Full name, Email, Mobile No., Password, and Confirm password. A captcha image with the numbers 6, 7, 4, 8, 8, 8 is shown, along with a refresh button. Below the captcha is a checkbox for agreeing to the ICMR terms & conditions. A blue Register button is at the bottom, with a link for existing users.


ICMR ePMS





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User Registration Form


Full name 

Email 

Mobile No. 

Password 


Confirm password 

6 7 4 8 8 8 

Enter captcha

I agree to the [ICMR terms & conditions](#)

Register

 [I already have a login](#)

STEP 1: If you are a new user, click on register and after filling all the details -> Click on “Register” -> it will show a message ‘Registration Successful’



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Registration successful.. X

LOGIN ID (REGISTER EMAIL ID)

example@gmail.com

PASSWORD



CAPTCHA

Enter Captcha

 **Login Securely**

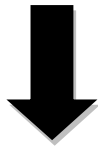
[Home](#) | [Register](#) | [Forgot Password?](#)

STEP 2: Login with the credentials for registered users





STEP 3: After log in, click on ‘Click to verify’ in red box on top left corner (**mandatory**)



After clicking on verify, an email verification link will be sent on registered PI's ePMS email address

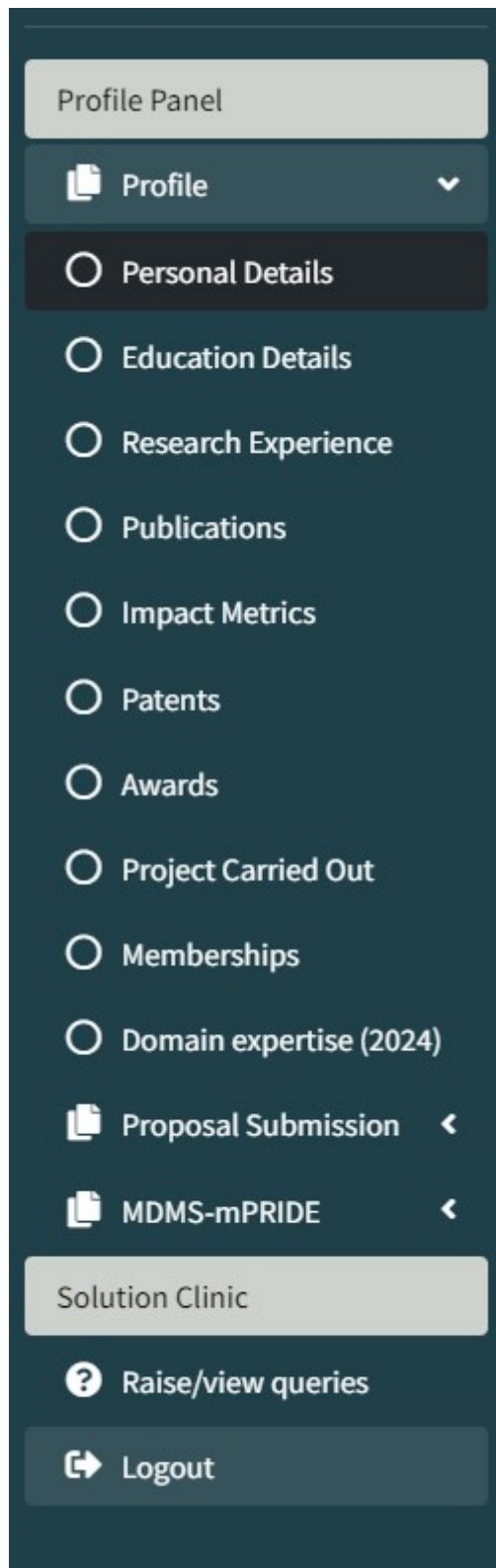




STEP 4: Open registered email and click on “Active email address” link to verify the email address.

Kindly check your spam folder if mail not received in inbox.





STEP 5: After verification, complete the appropriate sections under the Profile Panel.





STEP 6: After clicking on Personal Details under Profile section, click on “Add Personal Details”



The screenshot shows a form titled 'Personal details of Principal Investigator or Fellow'. The form is divided into sections, with the first section being 'BASIC INFORMATION'. The fields are as follows:

- Title ***: A dropdown menu with 'Select Title' as the current selection.
- First Name (Without title) ***: A text input field containing 'TEST_USER'.
- Middle Name**: A text input field containing 'Middle Name'.
- Last Name**: A text input field containing 'Last Name'.
- Mobile Number ***: A text input field containing '8654236547'.
- Email Address***: A text input field containing 'epmsicmrrecords@gmail.com'.
- Document proof of DOB ***: A dropdown menu with '(Matric/10th(10+2 system))/11th (Old System)' as the current selection.
- DOB as per proof***: A date input field containing '01-Jan-1980'.
- Name of Board***: A dropdown menu with 'Central Board of Secondary Education, Delhi' as the current selection.

Roll Number*
0123456789

Passing Year (Matric/10th(10+2 system)/11th (Old System))*
1995

Upload document copy* (.pdf 1 MB max)
Choose file document.pdf

Gender*
Female

Category*
GEN

WORKING INSTITUTE'S INFORMATION Note: Institute information is the information from where you will apply proposal

Select state in which your Institute situated*
DELHI

Select district in which your institute situated*
South East

Institute* [Know your Institute's State and District if not found in list](#)
Select Institute

STEP 7: Kindly fill in all the information asked in the personal details section (**It is a mandatory step**)

NOTE: Kindly upload class Xth **marksheets** under 'Upload document copy' and the input file should be a PDF of less than 1MB.



View Institute details **Add New** **Approved List** **Not Approved List** **All Institutes**

Note: Before add new Institute please check with below given option. If your Institute is not in the list then use "Add New" button given above.

Enter your Institute hint here: **Click to find**

Column visibility

Search:

| # | Institute Name | Type | State | District | Pincode | Status | Created at |
|----|---|------|-------------|--------------------|---------|--------------|------------|
| 1 | National Institute of Immunology | Govt | DELHI | WEST | 110067 | Approved | 16-03-2021 |
| 2 | National Centre for Cell Science | Govt | MAHARASHTRA | PUNE | 411007 | Approved | 16-03-2021 |
| 3 | National Brain Research Centre | Govt | HARYANA | GURGAON | 122052 | Approved | 16-03-2021 |
| 4 | Centre for DNA Fingerprinting and Diagnostics | Govt | TELANGANA | HYDERABAD | 500039 | Approved | 16-03-2021 |
| 5 | National Institute of Plant Genome Research | Govt | DELHI | WEST | 110067 | Approved | 16-03-2021 |
| 6 | Institute of Life Sciences | Govt | ODISHA | KHORDHA | 751023 | Approved | 16-03-2021 |
| 7 | Institute of Bio-resources and Sustainable Development | Govt | MANIPUR | IMPHAL WEST | 795001 | Approved | 16-03-2021 |
| 8 | Rajiv Gandhi Centre for Biotechnology | Govt | KERALA | THIRUVANANTHAPURAM | 695014 | Approved | 16-03-2021 |
| 9 | Institute for Stem Cell Science and Regenerative Medicine | Govt | KARNATAKA | BALLARI | 560065 | Not Approved | 16-03-2021 |
| 10 | Translational Health Science and Technology Institute | Govt | HARYANA | FARIDABAD | 121001 | Approved | 16-03-2021 |
| 11 | National Institute of Biomedical Genomics | Govt | WEST BENGAL | NADIA | 741251 | Approved | 16-03-2021 |
| 12 | Regional Centre for Biotechnology | Govt | HARYANA | FARIDABAD | 121001 | Approved | 16-03-2021 |
| 13 | National Agri-Food Biotechnology Institution | Govt | PUNJAB | S.A.S Nagar | 140306 | Approved | 16-03-2021 |

Add New Institute Detail

| | | | | | |
|--|---|--|--------------------------------------|--|--|
| Full Name * | Short Name | Institute Type * | | | |
| <input type="text" value="Institute Full Name"/> | <input type="text" value="Institute Short Name"/> | <input type="text" value="Select Type"/> | | | |
| Address Line1 * | Address Line2 | | | | |
| <input type="text" value="Address Line1"/> | <input type="text" value="Address Line2"/> | | | | |
| State * | District * | Phone No. | Pincode* | Website Url | City |
| <input type="text" value="Select State"/> | <input type="text" value="Select District"/> | <input type="text" value="Phone"/> | <input type="text" value="Pincode"/> | <input type="text" value="Website Url"/> | <input type="text" value="City Name"/> |
| Country | Remarks | | | | |
| <input type="text" value="Country Name"/> | <input type="text" value="Remarks"/> | | | | |

NOTE:

- If your institute doesn't exist in the ePMS institute list, click on 'Add New' in the blue box on top left and add the institute details for approval.
- During call for proposals any new institute approval requests should be sent 48 hours prior to the submission deadline.



WORKING INSTITUTE'S INFORMATION Note: Institute information is the information from where you will apply proposal

Select state in which your Institute situated*

DELHI

Select district in which your institute situated *

South East

Institute* [Know your Institute's State and District if not found in list](#)

All India Institute of Medical Sciences, Delhi

Your Designation in the Institute* [Add New Designation if not found in list](#)

Professor

Nature of Employment*

Permanent

Your Department*

TEST

[View Detail](#) [Save Detail](#)

STEP 8: Click on “Save Details” to save the personal details.

NOTE: Nature of Employment should be permanent/regular.



Dashboard Personal Detail Education Detail Research Exp Publication Patent Award Project Carried Out Membership

PI/Fellow detail information saved successfully

PI/FELLOW PERSONAL INFORMATION

| PERSONAL/BASIC INFORMATION | |
|---|---|
| Name of Principal Investigator(PI)/Fellow | Dr TEST_USER |
| Designation | (Professor) |
| Email address | epmsicmrrecords@gmail.com |
| Contact No | 8654236547 |
| Gender | Female |
| Category | General |
| PROOF OF DATE OF BIRTH | |
| Date of Birth | 01-Jan-1980 |
| Board of Education | Central Board of Secondary Education, Delhi |
| Roll No. | 0123456789 |
| Passing Year | 1995 |
| Uploaded document | View |

Make sure that your profile details are saved to move ahead with the proposal submission.