**NOMINATION FORMAT FOR**

**INAE-SERB, DST Abdul Kalam Technology Innovation National Fellowship**

**This Fellowship is applicable for TRANSLATIONAL RESEARCH ONLY**

***Explain in 100 words the nature of translational research proposed:***

1. Name of the Nominee:
2. Current designation and affiliation:
3. Area of Specialization:
4. Current Nationality:
5. Date of Birth:
6. Gender: Male Female Others
7. Category: GEN / OBC / ST / SC
8. Differently abled YES / NO
9. Nominee’ plan of work under the aegis of the INAE-SERB, DST Abdul Kalam Technology Innovation National Fellowship aimed at technology (product/process) development, prototype development, field trial, incubation of or registering a start-up company, or commercialization, if selected (within 1000 words/figures, diagrams, charts and illustrations can be included):
10. ***Topic:***
11. ***Objective:***
12. ***Motivation:***
13. ***Methodology:***
14. ***Anticipated outcome (deliverables):***
15. ***Timeline and milestones:***
16. ***Novelty of outcome:***
17. Briefly describe the work completed or being perused by the candidate within 500 words/ figures, diagrams, charts and illustrations can be included *(candidate’s work may have shown a significant impact on health sector/ engineering /agriculture by his/her findings, a clear statement is required to explain of whether any incubation, startup, technology demonstration and technology development has emerged from the candidate’s contribution.):*
18. ***Novelty and relevance of the research innovation achieved:***
19. ***Science and Engineering concept involved in the proposed technology:***
20. ***Contribution of the nominee in the proposal:***
21. ***Interest to society/market:***
22. Technology development, contribution and its status and significance (within 500 words/ figures, diagrams, charts and illustrations can be included):

Ready for / further work needed in one or more of the following:-

* Incubation of a technology company/ Creation of Start-up and any Technology demonstration (outline individual contribution)
* Leadership and Innovation in technology development activity
* Signature of individual contribution in translational research
* Patent filed or commercialized
* Technology adopted or transferred
* Industry participation or sponsorship

1. Contact Address:

Tel.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mobile\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FAX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Educational Qualifications (from Bachelor degree onwards)

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| S.No. | Degree | University | Year | Subjects | Percentage/GPA |
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1. Details of professional training and research experience:

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| S.No. | Place of Training | Position | Period | Country |
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1. Details of employment/position held in last 10 years:

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| S.No. | Employed at | Position | Period (From-To) | Country |
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1. Professional awards/recognition/fellowship (e.g. Swarnjayanti/Bhatnagar Prize, Fellow of INAE, INSA etc.):

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| S.No. | Name | Year | Donor organization |  |
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1. List of peer reviewed publications in last 5 years (authors, journal, reference) with impact factor (as per JCR) :
2. Details and status of patents filed/accepted and commercialized (International, National):

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| --- | --- | --- | --- | --- |
| S.No. | Details of Patent | Patent File No. | Status (filed/accepted) | International/National/Commercial |
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**Details of Nominator**

1. **Name of Nominator with Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Address and Contact Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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1. **Signature and Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Endorsement Certificate Format for the INAE-SERB, DST Abdul Kalam Technology Innovation National Fellowship**

1. Certified that the University/Institute welcomes participation of Dr./Prof. [name of the applicant] as Abdul Kalam Technology Innovation National fellow.
2. Certified that necessary R&D, administrative and financial support will be extended to him/her for research as per the terms and conditions of the grant throughout the duration of the fellowship.
3. Dr./Prof. [name of the applicant] is working as [designation] in the institute and engaged in research. He will be holding the position till [date]. The financial papers (statement of expenditure and utilization certificate) of his/her fellowship will be sent to INAE after the completion of each financial year.
4. Dr./Prof. [name of the applicant] is not availing any other fellowship.

Signature of the Head of the Institute/University with seal

Date…………………………….

Place……………………………