



Government of India

VIIIth National Training Programme on

**Entrepreneurship Development & Management
for Women Scientists & Technologists with the Government Sector**



Entrepreneurship
Development
Institute of India
Ahmedabad

Sponsored by Ministry of Science & Technology,
Department of Science & Technology, Govt. of India

10 - 21, February 2020

Organised by Entrepreneurship Development Institute of India, Ahmedabad

Photograph

NOMINATION FORM

NAME Prof./Dr./Ms.			
DESIGNATION			
ORGANISATION			
DATE OF BIRTH			
CATEGORY (GEN/SC/ST/OBC)			
DATE OF ENTRY IN GOVT. SERVICE (AS GROUP 'A')		CURRENT LEVEL/GRADE:	
PRESENT PAY AND GRADE PAY			
COMPLETE ADDRESS/ CONTACT NUMBERS /E-MAIL			

EDUCATIONAL /PROFESSIONAL QUALIFICATIONS (GRADUATION ONWARDS)			
SL. No.	YEAR	DEGREE	UNIVERSITY/INSTITUTE

RESEARCH EXPERIENCE			
SL. No.	YEAR	TOPIC OF RESEARCH	SPONSORING AGENCY

Note: 1. Incomplete applying will be rejected
2. Please attach a copy of salary slip (latest)

CONTD..2

EXPERIENCE / POSTINGS FROM LEVEL SCIENTIST 'B' ONWARDS (IN GROUP 'A')				
SL. No.	NAME OF THE ORGANISATION	POST HELD	FROM	TO

TRAINING ATTENDED				
SL. NO.	YEAR	NAME OF THE TRAINING PROGRAMME	NAME OF THE INSTITUTE	DURATION

SPECIFIC AREAS IN WHICH SKILL UPGRADATION DESIRED	1. 2. 3.
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Signature of the candidate

RECOMMENDATION BY THE CONTROLLING OFFICER

DATE:

(SIGNATURE OF THE RECOMMENDING OFFICER)
Name & Designation with Seal

VIIIth National Training Programme on Entrepreneurship Development & Management for Women Scientists & Technologists with the Government Sector

10 - 21, February 2020

Sponsored by : Department of Science & Technology, Govt. of India, New Delhi
Organized by : Entrepreneurship Development Institute of India (EDII), Ahmedabad

BIODATA

NAME Prof./Dr./Mr./Ms.																			

DESIGNATION:																			
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ORGANISATION:																			

DATE OF ENTRY IN GOVT. SERVICE (AS GROUP 'A')																			
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CATEGORY (GENERAL / SC / ST / OBC)																			
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DATE OF BIRTH																			
SEX (M/F)																			

PRESENT PAY																			
PAY LEVEL:																			

COMPLETE ADDRESS (OFFICE)																			

COMPLETE ADDRESS (RESIDENCE)																			

CONTACT DETAILS	PHONE (O)	PHONE (R)	MOBILE No.	E-MAIL

EDUCATIONAL / PROFESSIONAL QUALIFICATIONS (GRADUATION ONWARDS)					
SL. No.	EXAMINATION/ DEGREE	UNIVERSITY/ INSTITUTE	YEAR	SUBJECT	DIVISION/PERCENTA GE OF MARKS

EXPERIENCE / POSTINGS (IN GROUP 'A') (FROM THE LEVEL OF SCIENTIST –'B' ONWARDS)					
SL.No.	NAME OF THE ORGANISATION	DESIGNATION	FROM	TO	DUTY PERFORMED

TRAINING ATTENDED				
SL.No.	YEAR	NAME OF THE TRAINING PROGRAMME	NAME OF THE INSTITUTE	DURATION

RESEARCH EXPERIENCE				
SL.No.	YEAR	TOPIC OF RESEARCH	SPONSORING AGENCY	GIST OF RESEARCH

PAPER PUBLISHED / PATENT FILED/OBTAINED				
Sr. No	YEAR	TOPIC OF PAPER/ BOOK	GIST OF PAPER	NAME OF JOURNAL/ MAGZINE/ PUBLISHER

<p>Significant contribution made by you in the field of Science & Technology during your Service career (Max. 200 words).</p>

Date:

(Signature)