**NATIONAL ACADEMY OF BIOLOGICAL SCIENCES**

**[NABS]**

Application for award of

**Prof. M.S. Swaminthan NABS-Leadership Award**

**for EY-2024**



**Guidelines**

* Please read the guidelines carefully before filling up the application form and strictly follow the instructions given.

|  |  |  |  |
| --- | --- | --- | --- |
| **[Please fill the columns]** | | | |
| i | Name of the applicant | **:** |  |
| ii | Name of the section / subject under which application submitted | **:** | Tick mark against the section /subject given below: |
| *a.* | *Agriculture & Forestry Science* |  |  |
| *b.* | *Basic Science* |  |  |
| *c.* | *Veterinary & Fishery Science* |  |  |
| *d.* | *Food Science* |  |  |
| iii | Membership No. | **:** | LM- |
| iv | Date of Admission to NABS as Life member | **:** |  |
| v | Date of birth [dd-mm-yyyy] | **:** |  |
| vi | Age as on 31st December, 2024 | **:** |  |
| vii | Cooling period completed  [ as on 31st December, 2024] | **:** | **YES / NO** |
| viii | Whether R & PF paid?  (Only online transfer | **:** | Rs. 3000/- Yes / No |
| i. | Provide evidence of transfer | **:** |  |
| **For official Use only** | | | |
| i. | Whether remarks and signature of Proposer enclosed | **:** | **YES / NO** |
| ii. | Date of receipt of the Application | **:** |  |
| iii. | Whether the Member is Eligible for further scrutiny | **:** | **YES / NO** |
| iv. | Give reasons for rejection | **:** |  |
|  | **Eligible / Not eligible** | | |
|  | **Signature of Secretary** | | |

PART - I

Nomination Proposal

* Part- I: Should be filled, signed and sent along with application
* Without Part-I, application will not be considered for evaluation.

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Name of the applicant  ( in BLOCK LETTERS) | **:** |  |
| 2. | Name of the section  (Tick mark the section) | **:** | Agriculture & Forestry Science  Basic Science  Veterinary & Fishery Science  Food Science |
| 3. | Mention Specialization | **:** |  |
| 4. | Membership of NABS  (give the membership number) | **:** |  |
| 5. | a. Name of the Proposer | **:** |  |
|  | b. Address | **:** |  |
|  | c. Brief remarks about the  nominee’s suitability | **:** |  |
|  |  | | |
|  |  |  | Signature of Proposer: |
|  |  |  | Date: |

PART- II

Application for Award of Prof. M.S. Swaminathan

NABS- Leadership Award-2024

|  |  |  |  |
| --- | --- | --- | --- |
| Fix your recent PP size color photograph without your signature  NABS_logo-JPG | | | |
| **1.** | **Name of the applicant**  (in BLOCK LETTERS) | : |  |
| **2.** | **Name of Father / Husband** | : |  |
| **3.** | **Gender**  (tick mark) | : | **Male**  **Female** |
| **4.** | **Date of birth**  (DD-MM-YYYY) | : |  |
| **5.** | **Age**  **(Completed years as on**  **31st December, 2024)** | : |  |
| **6.** | **Name of the Section**  **Tick mark the section** | : | Agricultural Sciences & Forestry  Basic Sciences  Veterinary & Fisheries  Food Science |
| **7.** | **Field of specialization** | : |  |
|  | Present position | : |  |
|  | Address (Official) | : |  |
|  | Phone with STD code | : |  |
|  | Mobile No. | : |  |
|  | E-mail | : |  |
| **8.** | **Address (Residence)** | : |  |
|  | Phone with STD code | : |  |
|  | Mobile No. | : |  |
|  | E-mail | : |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **9.** | **Academic qualifications** | : |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Degree** | **University / Institution** | **Year** | **Distinction, if any** |
|  |  |  |  |
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| --- | --- | --- | --- | --- |
| **10** | **Academic career and positions occupied [top position first]** | | | |
| **No.** | **Designation /Position** | **Period / Duration** | **Institution** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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**PART- III**

**[Accomplishments]**

Kindly read the guidelines before filling these columns

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1.** | | **Leadership in his/ her respective domain of experience**  [Individual National and International grants / funds to improve research and technology]   * **PROVIDE PAGE NUMBER OF EVIDENCE:\_\_\_\_\_\_** | | | |
| **No.** | **Title of project** | **Funding agency** | **Duration**  **of project** | **Amount of Funding**  **(Rs. in lakhs)** |
| i. |  |  |  |  |
| ii. |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **2.** | **Publications in peer-reviewed journals [10 papers]** | | | | | |
| **Sl. No.** | | **Publications (Authors’ names, title, journal, volume, page nos., year of publication)** | **NAAS rating** | **SNIP/IF by SCOPUS** | **SNIP/IF by ISI** |
| 1 | |  |  |  |  |
| 2 | |  |  |  |  |
|  | |  |  |  |  |
| 10 | |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3.** | **Number of Ph.D. / Post-Doc fellows trained**   * **PROVIDE PAGE NUMBER OF EVIDENCE:\_\_\_\_\_\_** | | | |
| **No.** | **Title of Thesis** | **Name of University** | **Year of submission / degree awarded** |
| i. |  |  |  |
| ii. |  |  |  |

**4.** Evidence for h-index from Web of Science/Google scholar/Scopus

**5**. Evidence for Teaching subjects in UG, PG, and PhD programs (list of subjects, years taught,

Teaching awards from reputed institutions/societies)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **6.** | | **Number of Books published**   * **PROVIDE PAGE NUMBER OF EVIDENCE:\_\_\_\_\_\_** | | | | | |
| **No.** | | **Title of book** | **Author(s)** | **No. of Pages** | **Year of Publication** | **ISBN Number & Publisher's name** |
| **6.1.** | | **Number of books published by sole author (National /International)** | | | | |
| i | |  |  |  |  |  |
|  | |  |  |  |  |  |
| **6.2.** | | **Number of books published Edited books (National /International)** | | | | |
|  | |  |  |  |  |  |
|  | |  |  |  |  |  |

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| --- | --- |
| **7.** | **Leadership in the Institution of employment**   * **PROVIDE PAGE NUMBER OF EVIDENCE:\_\_\_\_\_\_** |

|  |  |
| --- | --- |
| **7.1.** | **Infrastructures developed**  Laboratory /creation of Library / digital library / Field Labs [Give details with funding / source of funding etc.] |
| i. |  |
| ii. |  |
| **7.2..** | **Other than the above- specify with details of funding / source of funding *etc*** |
| i. |  |
| ii. |  |

|  |  |
| --- | --- |
| **8.** | **Leadership in the Profession**  **Give details of nature of training, duration and purpose**   * **PROVIDE PAGE NUMBER OF EVIDENCE:\_\_\_\_\_\_** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **8.1.** | **Society Awards/Medals to the applicant** | | | |
|  | **Name of the Society** | **Name of the award/medal** | | **Remarks** |
|  |  |  | |  |
|  |  |  | |  |
| **8.2.** | **National trainings in the applicant’s field of specialization** | | | |
|  | **Name of the training** | **Duration** | **Beneficiaries** | **Remarks** |
|  |  |  |  |  |
|  |  |  |  |  |
| **8.3.** | **International trainings in the applicant’s field of specialization** | | | |
|  | **Name of the training** | **Duration** | **Beneficiaries** | **Remarks** |
|  |  |  |  |  |
|  |  |  |  |  |
| **8.4.** | **National /International Congress/ Conferences** | | | |
|  | **Name of the Congress/Conference** | **Duration** | **Beneficiaries** | **Remarks** |
|  |  |  |  |  |
|  |  |  |  |  |
| **8.5.** | **Vocational trainings organized** | | | |
|  | **Name of the training** | **Duration** | **Beneficiaries** | **Remarks** |
|  |  |  |  |  |
|  |  |  |  |  |
| **8.6.** | **Summer Courses for Teachers** | | | |
|  | **Name of the course** | **Duration** | **Beneficiaries** | **Remarks** |
|  |  |  |  |  |
|  |  |  |  |  |
| **8.7.** | **Transfer of knowledge into product or technology (patent/product developed)** | | | |
|  | **Name of the technology** | **Impact** | | |
|  |  |  | | |

|  |  |
| --- | --- |
| **Declaration by the Applicant** | |
| **I declare that**   * The particulars given above are true and correct to the best of my knowledge. * No vigilance / disciplinary cases are pending against me. * I am a Life Member of National Academy of Biological Sciences   (Life Member No:\_\_\_\_\_\_\_\_ and completed SIX months of cooling period as on  3**1st December, 2024.**   * **That I will abide by the decisions of Technical Review Committee of NABS.**   **Note:** If Life Membership Number is not available, indicate your receipt number | |
| **Signature:** |  |
| **Date:** |  |

Check List

[To be attached along with Application]

|  |  |  |
| --- | --- | --- |
| No. | Check for | Tick Mark |
| 1. | Whether section name under which nomination is to be considered- furnished? |  |
| 2. | Whether Life Membership Number is furnished? |  |
| 3. | **Whether Registration & Processing Fee of Rs. 3000/- paid online and evidence is attached with application?** |  |
| 4. | Whether the application is proposed by appropriate person? |  |
| 5. | Whether PP size photo is affixed on the application in the space provided? |  |
| 6. | Whether necessary supporting evidences are enclosed and serially numbered? [Annexure] |  |
| 7. | Whether the page number in which the evidences are appended is indicated in the appropriate place of the application? |  |
| 8. | Whether the application is in bound form? |  |
| 9. | Whether content page is prepared? |  |
| 10. | Whether all the pages are serially numbered? |  |
| 11. | Whether the cover is super scribed with **“Application for Prof. M.S. Swaminathan NABS-Leadership Award-2024**?” |  |

|  |  |
| --- | --- |
| **Signature:** |  |
| **Date:** |  |

**-----------------------------------END OF APPLICATION-----------------------------**