**Application for Research Award**

**for the Year 2024**

(Teachers should submit the information in the following format. The same should be submitted through the Head of the Department and through Dean/Director/Principal of the College/Institute. Enclose Xerox, self attested copies of supporting documents, latest photographs, etc.)

|  |  |  |  |
| --- | --- | --- | --- |
| **1.** | **General Information** | **:** |  |
| a. | Full Name | : |  |
| b. | Residential Address  | : |  |
|  | Contact details |  |  |
|  | Telephone (R) |  |  |
|  | Mobile |  |  |
|  | E-mail |  |  |
| c. | Office Address | : |  |
|  | Name of the College/Institute | : |  |
|  | Department | : |  |
|  | Designation | : |  |
|  | Telephone (office) with extension | : |  |
| d. | Date of Birth | : |  |
| e. | Area of Specialization  | : |  |
| **2.** | **Academic Qualifications**(Attach documentary proof) | **:** |  |
|  | UG | : |  |
|  | PG | : |  |
|  | Other | : |  |
| **3.** | **Complete details of Publications**(Attach documentary proof & list during **Jan 2023 to Dec 2023**)(Indexed in Scopus, Pubmed & Web of Science) | **:** |  |
| **4.** | **Quality of Publication (Jan to Dec 2023)*** **Number of Publication according to Quartile of Journal**
* **Highest Impact factor publication**

 | **:** | Q1 : 4Q2 : 3Q3 : 2Q4 : 1IF > 15 :IF 10 – 15 : IF5 – 10 :IF < 5 : |
| **5.** | **Extra-mural Research Grant received (From Sep 2023 till Date)**1. **International**
2. **National**

**(Mention grants (amount sanctioned, received & utilized)** | **:** | **Sanctioned Received Utilized** |
| **6.** | **Significant Relevance of the research work carried out during the year as reflected in the publications with principal findings**(Write up in 500 words) |  | **Use Separate Sheet if necessary** |
| **7.** | **Citations as per Scopus & Web of Science for overall period** |  | **Scopus :** **web of science :**  |
| **8.** | **Patents / Design Patent** **Published -** **Granted -** **Technology transfer or start-up-****(Attach registration copy as proof)** * **Copyright**
* **Start-ups**
 | **:** |  |
| **9.** | **Any other relevant information** | **:** |  |

Date: (Signature of the Faculty)

Date: (Signature and Seal of the

Head of the Department)

Date: (Signature and Seal of the

Dean / Director / Principal of the College/Institute)