

## **ISVIB – GADVASU Women Scientist Award**

**General Information:** This award was instituted from the money donated by the organizers of XII Annual Convention of ISVIB held at Punjab Agricultural University, Ludhiana in the year 2005.

**Number of Awards:** One award each year

### **Terms and conditions:**

1. The award is an individual award reserved for women scientists.
2. There is no age limit for the applicants.
3. Research Area: Immunology and Biotechnology
4. The applicant should be a life member of ISVIB.
5. ISVIB reserves the right to defer the award if suitable candidates are not available in the particular year.
6. The deferred award will not be carried forward to next year.
7. The research should have been carried out during the preceding three years.
8. The research should have been carried out in India and should not have been published in any journal
9. The candidate for the award should not receive any other ISVIB award and/or medal in the same event by presenting the work that included for this award.
10. The doctoral student work should not be presented by the guide/chairman of the advisory committee for the award.

**Hard copy application shall be sent to**

**The Secretary, ISVIB  
Department of Veterinary Microbiology,  
Madras Veterinary College, Vepery, Chennai 600007, TN**

**Soft copy of the same shall be sent to  
Secretary.isvib@gmail.com**

# ISVIB – GADVASU Women Scientist Award

## APPLICATION FORM

Full Name of Candidate (Capital Letters)	
Date of Birth	
Gender	
Nationality	
Contact Address	
Email ID	
Mobile Number	
Institutional Affiliation	
Have you enclosed a copy of ISVIB membership certificate?	<b>YES / NO</b>
Title of research work	<i>[Enclose abstract of research work; word limit: 300]</i>
Whether the same work has been published in any journal?	Yes/ No <i>If yes provide details</i>
Whether the same work has been submitted for any other award?	Yes/ No <i>If yes provide details</i>
	<b>Signature of candidate</b>

### ENDORSEMENT BY THE HEAD OF DEPARTMENT/ INSTITUTION

I hereby recommend Dr./Mr./Ms. \_\_\_\_\_ for ISVIB – GADVASU Women Scientist Award. I confirm that the above research work has been carried out at this department/ institution \_\_\_\_\_ (*name of the department/ institution*) in the preceding three years and that this application fully meets the eligibility criteria.

Date:

Signature

Place:

Name:  
Designation:  
Office seal: