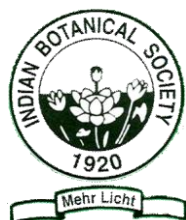


## Election of the Fellowship

# THE INDIAN BOTANICAL SOCIETY



**Nomination Form for election to the Fellowship of the Society  
(All entries in the form should be typed)  
(Soft copy in MS-Word only to be submitted)**

**Note: No Hard Copies are to be sent.**

1. Please download this form -fill and email.

**The Soft Copy of the completed nomination form should reach to the Secretary, Indian Botanical Society at [secretaryibs2017@gmail.com](mailto:secretaryibs2017@gmail.com) , by 31<sup>st</sup> July,2024 for consideration.**

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### **Eligibility Criteria and limitations**

- (i) High academic qualifications (e.g. Ph.D. or equivalent) / or state of knowledge contribution, in any discipline of Science and Technology relating to botanical sciences.
  - (ii) Life Member of at least Five years of standing as a Member of the Indian Botanical Society as on 31<sup>st</sup> December of the year.
  - (iii) Research publications of high quality, and /or evidence of exceptional ability as a teacher or involvement in Science Promotion / Popularization Programs relating to botanical sciences.
  - (iv) Nomination should be proposed either by a Fellow of the Indian Botanical Society / or Head of the Institution where nominee has been working, certifying the information contained in the nomination proposal.
  - (v) Nominations received shall be screened at the end of the Secretary, and the election of the Fellows shall be done by circulating the valid nominations between President, Secretary and the Chief Editor.
  - (vi) Not more than 20 Fellowships shall be awarded in a Calendar year.
  - (vii) No column should be left blank; if not applicable then write NA.
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1. Name of the nominee in full : \_\_\_\_\_  
Surname Forename(s)

2. Designation and :  
Name of the  
Institution

3. (a) Date of Birth : (b) Gender : Male / Female

4. Nationality :

5. Date and Year of Enrolment as Annual / Life Member of the Society:  
(provide receipt no. if available)

6. Address

Official \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Residential \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ph.No.....

Email.....

7. Educational Qualifications (graduation onward):

Degree/Diploma	University/Institution	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Mention the Fellowship of the Academies / Membership of the Learned Societies, possessed, if any:

9. Significant research / professional contributions (Not exceeding 100 words).  
This should include field of professional activity and teaching and research experience including research guidance, notable research contributions, and involvement in the activities of Indian Botanical Society:
10. List best five publications, in refereed Journals only, including those accepted; and Books, Monographs etc. (Please give names of all the authors, year, title, name of the Journals, volume, page no., DOI no.:
11. Association with the Indian Botanical Society:  
Please describe in few lines your association, e. g. association as a member since (year) and service to the activities of the society, participation in IBS Conferences(mention year(s)), organizing host for memorial lectures / annual conference, chairing / judge of academic sessions, member of executive council; service to JIBS as an editor / editorial board member / contributing author and / or reviewer for JIBS / other promotional activities; and any other relevant information not covered above.

It is hereby certified that the information contained above is correct. No disciplinary or criminal proceedings in any court is pending against the nominee or was registered in the past.

Date and Place

Signature of the nominee

Date and Place

Name and Signature of the proposer