



**JINDAL PRIZE**

**SITARAM JINDAL  
FOUNDATION**  
*Dedicated to the service of mankind!*

**FORM 1A  
THE JINDAL PRIZE  
NOMINATION FORM  
INDIVIDUAL  
YEAR 2011**

Passport size  
photograph  
of nominee  
(to be pasted)

**For Office Use**

S No/Date  
\_\_\_\_\_

Ref No

Category Code

II.	Prize for Health
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- i. The Jindal Prize for Rural Development & Poverty Alleviation;
- ii. The Jindal Prize for Health – including drugless healing;
- iii. The Jindal Prize for Education - with emphasis on moral upliftment;
- iv. The Jindal Prize for Science, Technology and Environment; and
- v. The Jindal Prize for Peace, Social Harmony & Development.

***(FOR NOMINATOR)***

To  
The Jury  
The Jindal Prize

I, Dr. Rajeev Sharma, do hereby propose the name of Dr. Ashok Kumar Yogendra Gupta for the award of '**JINDAL PRIZE 2011**'.

I acknowledge the nominee having made significant contributions of exceptional nature, of current significance, for the welfare of Indian citizens in the country, all or any of which helps eradicate/alleviate poverty and social evils.

I know the nominee personally and do verify his credentials to the best of my knowledge & belief. The nominee aforesaid:-

- a) is not doing the designated activity for commercial purposes and the achievements made by him are transparent and open for public without any profit motive.
- b) is not an employee, family member or close relative of the Jindal group / its sister concerns / the foundation / the prize secretariat or any other persons associated with the prize scheme.
- c) Is of good moral character

Please describe the project/Work/ Contribution/ Achievements, in the space given below, highlighting basis of the nomination with particular reference to its outstanding character and indelible impact for the welfare of the human beings:

**(DESCRIPTION AS ANNEXURE:)**

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Nominator

Name :

Profession/Occupation:

Designation :

Address:

Telephone No.:

Mobile No.:

E-mail :

## 2. PARTICULARS OF THE NOMINEE

- a) Name of Nominee DR. ASHOK KUMAR GUPTA
- b) Father/Husband's Name YOGENDRA SWAROOP GUPTA
- c) Date of birth 12TH JULY 1951
- d) Place of Birth BALAGHAT (M. P.)
- e) Nationality INDIAN
- f) Gender: Male
- g) Profession / Occupation CONSULTANT PLASTIC SURGEON
- h) Correspondence Address 16, LAUD MANSION  
21, M KARVE ROAD, MUMBAI  
400004 INDIA
- i) Permanent Address SAME AS ABOVE
- j) Tel. No.: Res: + 912224328963  
Office: + 912223888963  
Mob: +919820289205  
  
Fax No. + 912223893849 / 22080871  
  
E-mail: drashokgupta@vsnl.net  
  
Website: drashokgupta.com
- h) Educational / Professional qualifications : As per the Annexure
- k) Permanent Account Number

