



**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
-----	---------------------

- 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

### **3. PROJECT PROFILE**

Please enclose a write up, of not more than seven A4 size pages written/typed on one side, describing the project in detail so as to enable the evaluators/Jury to understand the significance of the work undertaken by the nominee, particularly covering the following aspects:

- *Nature of project/work*
- *Motivation & objective behind the project*
- Means and methodology adopted in achieving the objective
- Extent of *Geographical area covered and target population benefited.*
- summary of report of impact assessment study, if any, undertaken by an accredited agency,
- *source of funding and application of funds* in the last three years,
- *Future Action Plan*

### **1. CO-WORKERS**

Please mention details of coworkers if any.

### **2. OTHER ACHIEVEMENTS**

Other pioneering / innovative work done by the nominee

3. Have the works and achievements of the nominee been felicitated by any other agency? if so, please give details.

4. Has the project/achievement been published in journals of repute or has received publicity or media coverage. Please give details and enclose copies of publications, press reports, CDs/ VCDs etc.

## 8. PROJECT REFERENCES

(Please list names, with a brief identification by title or position of three persons with contact details who are in the knowledge of nominee's project/work/contribution/achievement.

1.

1. Name: 2. Tel.No : 3. Fax: 4. Email:	Address:..... ..... ..... ..... .....
---	---

	.....  .....  .....
--	---------------------------------

2.

1. Name: 2. Tel.No: 3. Fax: 4. Email:	Address:.....  .....  .....  .....  .....  .....  .....  .....
--	--

3.

1. Name: 2. Tel.No : 3. Fax: 4. Email:	Address:.....  .....  .....  .....  .....  .....  .....
---	---

--	--

9. Any other additional information in support of the nomination:

1. Please list all enclosures and support materials accompanying the nomination:

Sl. No.	Details of Annexure/Audio/video CDs etc.	Annexure No.
Total No. of annexures enclosed		

### DECLARATION

I, \_\_\_\_\_ do hereby declare that:

- ❖ By submitting a nomination, I accept the Terms & conditions of the Jindal Prize Scheme.
- ❖ Mere making of this nomination may not entitle me to an award.
- ❖ The decision of the jury is final and cannot be challenged in any court of law.
- ❖ The information provided in the nomination form shall be treated as public and may be used for any purpose as deemed fit by the 'S J Foundation'.
- ❖ This nomination shall not cast any contractual obligation on the S J Foundation.

I do hereby verify that, to the best of my knowledge and belief, the statements made and information supplied herein is true and correct.

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

Signature of Nominee

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