

## Nomination Form for DISTINGUISHED ALUMNUS/ALUMNA AWARD

INDIAN INSTITUTE OF TECHNOLOGY (BHU), Varanasi

(Last date for receipt: 10<sup>th</sup> August, 2026)

Tick the appropriate category (Any One):

|                                                    |  |
|----------------------------------------------------|--|
| Profession                                         |  |
| Academics                                          |  |
| Research and Innovation                            |  |
| Industry/Entrepreneurship                          |  |
| Public Life                                        |  |
| Distinguished Services to the Institute            |  |
| Young Alumnus Achievers Award (below 45 years age) |  |

1. Name of the Nominee: \_\_\_\_\_
2. Date of Birth : \_\_\_\_\_
3. Mobile No.: \_\_\_\_\_ 4. Email: \_\_\_\_\_
4. Present Position and Official address: \_\_\_\_\_  
\_\_\_\_\_
6. Positions held (in chronological order): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Professional Area: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Academic Qualifications (Bachelor's Degree Onwards):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. (a) Significant Contributions by the nominee during his/her career in the subject area of the award in about 1000 words (Please attach separate sheets). The list of significant papers/articles/brochures and any other relevant material in the area shall be enclosed.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (b) Summarize the most significant work (maximum of 10) of the nominee on which the recommendation is based in about 100 words. Attach the copy of relevant documents.  
\_\_\_\_\_  
\_\_\_\_\_

(c ) Impact of the contributions in the respective field:

---

---

10. Recognitions/Awards received, if any, on the work of nominee:

---

---

---

11. The Name, Address, email and mobile no. of two referees:

Referee 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Mobile No. \_\_\_\_\_

Referee 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Mobile No. \_\_\_\_\_

12. Any additional information of relevance:

---

---

Note: Either one of the following two columns has to be filled. Left column is for self-nomination while right one is for nomination by the Head of the organization or an eminent person of the repute.

(for self nomination)

Applicant's Signature \_\_\_\_\_

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Organization: \_\_\_\_\_

\_\_\_\_\_

Place:

Date:

(for nomination by Head of organization  
or an eminent person of repute)

Applicant's Signature \_\_\_\_\_

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Organization: \_\_\_\_\_

\_\_\_\_\_

Place:

Date: