

INDIAN ASSOCIATION FOR THE STUDY OF
TRADITIONAL ASIAN MEDICINE



www.iastamindia.org

ORATION / AWARD NOMINATION FORM

From:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

(Kindly ✓ in the boxes)

Member: Patron Life Associate Institutional Annual Member of NAC

To
The Co - ordinator , IASTAM – India
C/O Office of the Principal, College of Ayurved, Bharati Vidyapeeth University,
Pune Satara Road, Katraj – Dhankawadi , Pune 411043

Dear Sir,

I propose the following nominees for IASTAM Awards.
This is to confirm that I have taken the consent of each of the nominees as proposed below Necessary documents are attached herewith.
I have read the declaration and guidelines for the nomination of IASTAM awards carefully and agree to abide the same.

**1. Nomination for IASTAM Pandit Shiv Sharma Oration
For Contribution to Promotion of Ayurveda**

Name:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

Justification of the proposed name Complete Bio-data of the nominee Consent of the Nominee

**2. Nomination for Prof. K. N. Udupa IASTAM Award
For Contributions to Research in Ayurveda / Indigenous Systems of Medicine**

Name:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

Justification of the proposed name Complete Bio-data of the nominee Consent of the Nominee

**6 . Nomination/s for Mathuradas Parikh IASTAM Award
For Excellence in Profession - Ayurveda**

Name:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

Justification of the proposed name Complete Bio-data of the nominee Consent of the Nominee

**7 . Nomination/s for Vaidyraj Haribhau Paranjape IASTAM Award
For Excellence in Shalya-Shalakya Tantra (Surgery)**

Name:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

Justification of the proposed name Complete Bio-data of the nominee Consent of the Nominee

**8 . Nomination for Yoga Forum Muchen Patanjali IASTAM Award
For Contributions to Interdisciplinary Development of Yoga**

Name:
Title First Middle Surname

Address:
.....

E-Mail: Mobile:.....

Justification of the proposed name Complete Bio-data of the nominee Consent of the Nominee
