

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 v' 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

**3. Nomination for Dr. C. Dwarkanath IASTAM Award  
For Contribution to Contemporary Interpretation or Application of Ayurvedic Principles**

**Name:** Title First Middle Surname

Address: .....

E-Mail: .....Mobile: .....

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

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**4. Nomination for Dr. K. M. Parikh IASTAM Award  
For the Contribution to Development of Ayurvedic / Herbal Pharmaceuticals**

**Name:** Title First Middle Surname

Address: .....

E-Mail: .....Mobile: .....

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

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**5. Nomination for Vinaben Patel IASTAM Award For Excellence in Teaching - 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

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**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

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**7. Nomination for Yoga Forum Munchen 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

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**8. Nomination for Shri Gopaldas Parikh IASTAM Award  
For Contributions to Drug Development in the field of Phytochemistry, Medicinal Chemistry,  
Pharmaceutical Chemistry or Biochemistry**

**Name:** .....

*Title*

*First*

*Middle*

*Surname*

Address: .....

.....

E-Mail: .....Mobile: .....

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

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**9. Nomination for Vaidya Chandraprakash IASTAM Award**  
**For contributions in the subject of Rasashastra**

Name: .....  
Title First Middle Surname

Address: .....  
.....

E-Mail: ..... Mobile:.....

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

**10. Nomination for Shri Jugatram Vaidya IASTAM Award**  
**For Excellence in Shalya Tantra**

Name: .....  
Title First Middle Surname

Address: .....  
.....

E-Mail: ..... Mobile:.....

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

.....  
**Signature of the Proposer**

Date:        
dd mm yyyy

**Please note:**

*This should reach IASTAM on / before 30 November 2021*

**✓✓✓ This could be sent by Post / Fax-020-24365289 / Mail : [iastam.india@gmail.com](mailto:iastam.india@gmail.com)**

**Kindly provide attachments as per the necessity.**

**For Office Use Only:**

Received on First Screening on Considered for Scrutiny  Filed

dd mm yyyy dd mm yyyy

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**Co - Ordinator, IASTAM**