

For Official Use

Sl. No.:

Received on:

Government of West Bengal
Department of Science & Technology
Bikash Bhawan, 4th Floor, Eastern Block, Salt Lake, Kolkata-700091

Application Format for State Innovation Award (SIA)

(Photocopy of this form may also be accepted; please use permanent ink while filling this form and complete all the points. Incomplete form may not be considered)

1. Name of the Innovator:
2. Age:
3. Address for communication with pin code, ph no, mobile no, e-mail id:
4. Educational and Professional Qualification:
5. Profession:
 - (a) Earlier:
 - (b) Present:
6. Title of Innovation:
7. Purpose and Details of the Innovation with adequate documents (attach separate sheet, Photograph, VCD etc. if necessary):
8. Benefit & Improvement due to your Innovation:
9. Do you think that the efficiency of the present knowledge-practice can be further improved in future, if yes, how and if not, why:
10. Help (Idea, Financial, Technical etc.) received before and during the Innovation:
11. Did you face any problem(s) in its development, experience failure(s) and what were the ways used to overcome these:

Paste your recent
passport photograph

(2)

12. Have you made any improvement in your practice over the years? If so, please describe these improvements:

13. Can DST-GoWB share your Innovation with others for its popularization/ commercialization?

14. Have you applied for patent, if yes, what is the reference no. (attach proof)?

15. Have you applied to National Innovation Foundation (NIF) or any other such type of award competition? If yes, give details including the accepted reference no. etc.

16. Any other information you want to share:

UNDERTAKING

I do hereby declare that the above-mentioned statements and declarations alongwith all the attached documents (papers/drawings/ photographs/ CD/DVD etc.) in this application are complete, true and correct to the best of my knowledge and belief. The submitted Innovation is done by me/us with/without any financial or technical help from anybody/ organisation. I also declare that neither anybody before me/us has done the same Innovation nor I have copied any one's work and I have not received any award for this innovation.. In the event of any information found false, misleading or incorrect at a later stage, even after receiving the State Innovation Award, if any, my application may be cancelled and the Award may be revoked by DST-GoWB and I shall be the sole responsible if any legal action is taken against me for this purpose.

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Place & Date

.....
Signature of the Innovator

Witness (Name & Signature with Address, pin code, ph no, mobile no, e-mail id):

- 1.

- 2.

Comments of Scout (with Address, pin code, ph no, mobile no, e-mail id):

.....
Place & Date

.....
Signature of the Scout