

Karnataka Academy of Science and Technology

Department of Science and Technology, Government of Karnataka

KSTA Award for Innovations by General Public

1. Full name:	
2. Date of Birth & Age:	Date : Age:
3. Present place of work (if any) with details	
4. Contact Address (including phone, mobile & email):	Phone/ Mobile: Email :
5. Is the project work carried out in any Institution?:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the name of the organization:
6. Have you received any funding for the project?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, the name of the grant institution:
7. Have you received any Award for the proposed project?:	<input type="checkbox"/> Yes <input type="checkbox"/> No Award Name: Institute/Department awarded:
8. Title of Innovative Project:	
9. Describe in up to 100 words the features of the innovative project which clearly shows creativity and total amount spent:	Details are attached in a separate page at Annexure 1 <input type="checkbox"/> Yes <input type="checkbox"/> No
10. Write in less than 250 words innovative prototype model or product developed along with its salient features.	Innovative elements, distinctive design feature as well as usefulness to the society (Please attach separate page as an Annexure): Details are attached in a separate page at Annexure 1 <input type="checkbox"/> Yes <input type="checkbox"/> No
11. Have you ever been arrested / prosecuted / convicted by Court of Law?	<input type="checkbox"/> Yes <input type="checkbox"/> No

DECLARATION

I hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. I understand that the project work should not have been carried out in any institution/organization and also any attempt to bring influence to show favour will be deemed as disqualification and the innovative project of such person will be rejected without any intimation.

Place:

Date:

Place:

Name:

Signature: