**APPLICATION FORM FOR ISHG YOUNG SCIENTIST AWARD**

|  |  |
| --- | --- |
| Name and address |  |
| Qualification |  |
| Date of Birth\* |  |
| Institution where work was carried out |  |
| Email ID |  |
| Telephone (Work) |  |
| Telephone (Residence)/Mobile No. |  |
| Years of research experience |  |
| Papers published (if any) excluding those communicated or under preparation\*\* | Foreign journals:  Indian Journals: |
| Number of reprints enclosed in three sets |  |
| Name and email ID of the Supervisor |  |
| Are you a member of ISHG  If yes, Tick one of the two | o Life member  o Annual member |
| Membership Number |  |

\*Enclose attested copy of one of the following: Birth certificate/ SSLC/HSC/CBSE marks card

\*\* Enclose all the reprints copy.

**Check List:**

Evidence of date of birth

Six copies of Application form

Six copies of Abstract (not exceeding 1000 words)

Six copies of full length paper

Six copies brief bio‐data not exceeding 2 pages

Reprints of all published papers.

All correspondences should be made to: **The Secretary, Indian Society of Human Genetics, (complete address with email, and telephone no.)**