

APPLICATION FORM

First Name: _____ Last Name: _____

Birth Date: _____

Address: _____

City: _____ State: _____ ZIP _____

Email: _____ Cell Phone: _____

Emergency Contact: _____ Phone: _____

Title/ Position: _____

Institute/ Organization: _____

Department/ Lab: _____

Website: _____

Member of Indian Pharmacological Society: ☐ Yes Member ID: _____
☐ No

Education: <input type="radio"/> UG _____	Status _____
<input type="radio"/> PG _____	Status _____
<input type="radio"/> PhD _____	Status _____
<input type="radio"/> Postdoc _____	Status _____
<input type="radio"/> Others _____	

Professional experience: _____

Area of research: _____

Association with national/international scientific societies: _____

Project title: _____

Type of non-animal method:

☐ Cell-based assay ☐ In-silico model ☐ Organ-on-chip ☐ 3D tissue model

☐ Organoids ☐ Other (Please specify): _____

Status of the method:

☐ Concept/ prototype ☐ Fully developed ☐ Validated ☐ Implemented in regulatory framework

Project status: ☐ Completed (Year:.....) ☐ On-going

Project funding body (if any): _____

Publications related to non-animal methods (If any):

How this method will replace the use of animal in regulatory testing? (Max 300 words)

Please attach the following supporting documents:

- Updated CV / Resume (max 3 pages).
- Evidence of impact (e.g., reports, regulatory submissions, patents, publications).
- Passport size photograph.
- Consent/ approval from all contributors.
- Letters of support from supervisor (For Masters/ PhD students).
- Letters of support from laboratory/ department head (For Postdocs and scientists)
- Full project detail (Pdf).
- **Send the application form and all the relevant documents to Dr Rohit Bisht @
Email: rohitb@petaindia.org**

Award includes:

- Registration fee (upto 6,000 Rupees)
- IPS- Membership (1 year)
- Cash prize
- Certificate
- PETA India gift pack

DECLARATION

I, the undersigned, declare that the information provided in this application is accurate and that the research submitted is my original work. I agree to the use of this information for evaluation and award consideration.

NAME:**DATE:****SIGNATURE**