## INDIAN INSTITUTE OF CHEMICAL ENGINEERS

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## **NOMINATION FORM A –11**

## THE AMBUJA'S BEST STUDENT CHAPTER AWARD

Year : 2018

(First Prize and Second Prize)

(N.B. Make use of this format to prepare **5 nos**. **of hard copies** of the nomination papers including all appendices and one set of reprints or related documents along with **a soft copy in CD**. Do not type on this form)

- 01. Name of the Student Chapter :
- 02. Name and Address of the Institute :
- 03. Name of the Regional Centre to Which the Student Chapter is affiliated
- 04 Whether the Institute is an Organizational Member of IIChE (Yes / No ):
- 05. Complete Address of the Student Chapter for Correspondence:

a)	Institute	
	Tel : Email :	 Fax :

- 06. Name of the Coordinator responsible for the Student Chapter
- 07. Executive Committee (Name, Designation, Class)
- 08. Details of student members
  - (a) Numbers and names of student members enrolled during previous academic year
  - (b) Numbers and names of student members enrolled during current academic year
- 09. Details of activities
  - (a) Number of seminars / workshop / Refresher Course organized (Give details including names of speakers, topics of talks, dates and venues:
  - (b) Number of factory visits organized (Give details including names of factories, dates and umber of participants):
  - (c) Any intercollegiate competitions organized and its impact on profession (give a brief report)
  - (d) If any souvenirs published (include one copy) and advertisement revenue collected
  - (e) If annual general meeting is held (give details of venue, date, accounts)
  - (f) Any intercollegiate sports festival organized by the Chapter with details
  - (g) Any other relevant information
- 10. Particulars of the Research Publications by any student members (only UG students) (Names of authors in order of appearance in print, title, name of the journal, volume ,issue, pages, year of publication

11. Proposed plan of actities for the current academic year

12.Last date of submission: 15<sup>th</sup> September 2018

We declare that the above information is true.

Signature and Name of the Coordinator

Signature and Name of the Hon. Secretary

Date :

Place :

Forwarded through the Head of Department/Institute from where the student chapter is operating

Signature and Name of the Head

Date :

**Official Stamp:** 

N.B.: The Institute, to which the Student Chapter belongs, should preferably become an Organizational Member of IIChE.