



**ADMINISTRATIVE STAFF COLLEGE OF INDIA**  
 Bella Vista, Hyderabad - 500 082, Telangana (India)  
 Grams: "BELLAVISTA", Phones: 66534273, 66533000, Ex-273  
 Fax: 0091-40-66534356 Email: bvns@asci.org.in

निदेशक का वैयक्तिक अनुभाग  
 डायरी सं०..... 531  
 दिनांक..... 30/6/15  
 भा.प.वि.अ.सं. इज्जतनगर (2015)

Prof. B.V.N. Sachendra

04<sup>th</sup> June, 2015

**Program on Science Administration and Research Management**  
*(Sponsored by Department of Science and Technology, Govt)*  
**August 17 – 28, 2015**  
**Invitation for Nominations – Reg.**

CAO (A)  
 30/6/15

Dear Sir,

As you are aware, in the prevailing dynamic and fast changing economy, issues relating to management have assumed importance for scientists. In this scenario, we are happy to announce that we will be conducting a two-week training program on Science Administration and Research Management.

The program is sponsored by Department of Science & Technology, Govt. of India. The program has been designed especially keeping in mind the need of scientists and technologists working in science & technology institutions, R&D Labs and autonomous bodies.

The program will focus upon technology management, development of S&T, leadership and IPR management, science audit, performance management of S&T organizations, decision-making skills, and project management. It aims at familiarizing the participating scientists with institution building approaches and provides them with a forum for interaction on scientific matters with a peer group from the scientific and research community. It is designed to prepare scientists to occupy positions of leadership in the organization.

We shall be glad if you could nominate to this program, two Scientists and Technologists (of grades C to G or equivalent) from your organization. Kindly ensure that the nominees should have put in a minimum of 9 years of service and should not be more than 58 years of age (as on 1<sup>st</sup> July 2015).

Nomination form in the format set by DST is herewith enclosed. Nominations will be accepted on first-come first-serve basis since there are limited seats in the programs. We therefore request you to kindly send nominations early. Nominations duly signed, by the controlling officer may be sent directly to the undersigned by speed post / courier / fax / e-mail. I can be reached at bvns@asci.org.in

Please note that DST sponsors the program fee of the participants, which includes board and lodge, tuition fee and related expenses. However, travel expenses must be borne by the respective sponsoring organisations.

We look forward to hearing from you in this matter and to your support for the program.

Yours Sincerely

*Sachendra*

B V N Sachendra

श्री. 15.2.21. 59  
 6.7.15

SAO (A)  
 11/7/15  
 45  
 3h



मु० प्र० अ० कार्यालय  
 डायरी सं०..... 378  
 दिनांक..... 11/7/15  
 इज्जतनगर

सिखंडी अनुभाग (प्रथम)  
 डायरी सं०..... 1085  
 दिनांक..... 06/07/15  
 भा.प.वि.अ.सं. इज्जतनगर



**GOVERNMENT OF INDIA**  
**MINISTRY OF SCIENCE & TECHNOLOGY**  
**DEPARTMENT OF SCIENCE & TECHNOLOGY**  
**TECHNOLOGY BHAWAN, NEW MEHRAULI ROAD, NEW DELHI – 110 016**  
**TEL No. 011-26524941, 011-26590340, FAX – 011-26864570, 011-26590340**

## NOMINATION FORM

<b>TRAINING PROGRAMME, INSTITUTE &amp; DATE OF TRAINING</b>	
---	--

<b>NAME</b> Prof./Dr./Mr./Ms.			
<b>DESIGNATION:</b>		<b>ORGANISATION:</b> LOCATION/ MINISTRY/ DEPTT/GOVT.	
<b>SEX (M/F)</b>		<b>PRESENT PAY AND GRADE PAY:</b>	
<b>DATE OF BIRTH</b>		<b>DATE OF ENTRY IN GOVT. SERVICE (AS GROUP 'A')</b>	
<b>COMPLETE ADDRESS / CONTACT NUMBERS / E-MAIL</b>			

<b>EDUCATIONAL / PROFESSIONAL QUALIFICATIONS (GRADUATION ONWARDS)</b>			
SL. No.	YEAR	DEGREE	UNIVERSITY/INSTITUTE

<b>RESEARCH EXPERIENCE</b>			
SL.NO.	YEAR	TOPIC OF RESEARCH	SPONSORING AGENCY

EXPERIENCE / POSTINGS FROM LEVEL SCIENTIST 'B' ONWARDS (IN GROUP 'A')				
SL.NO.	NAME OF THE ORGANISATION	POST HELD	FROM	TO

TRAINING ATTENDED				
SL.NO.	YEAR	NAME OF THE TRAINING PROGRAMME	NAME OF THE INSTITUTE	DURATION
SPECIFIC AREA IN WHICH SKILL UPGRADATION DESIRED		1. 2. 3.		

*Signature of the Candidate*

RECOMMENDATION BY THE CONTROLLING OFFICER

(SIGNATURE OF THE RECOMMENDING OFFICER)  
Name & Designation with Seal

N.B. : Mail this form to the concerned Training Institute under intimation to the Under Secretary (Training), DST at [trngcell.dst@nic.in](mailto:trngcell.dst@nic.in)