



To Reach the Unreached

Society for the Advancement of Library and Information Science (SALIS)

AutoLib Tamilnadu Best Young Librarian Award

Application Form

(Give full details and attach support documents wherever necessary for verification)

1. Personal Data

- Name : Mr. / Ms./Dr. _____
- Date of Birth : _____ Age: _____
- Contact Address : _____
- E-mail : _____ Tel (Off): _____ Res: _____
- Years of Experience: _____

2. Qualification(s)

- Educational
- Professional
- Any other

3. Employment Details (Start with Current)

Designation	Organisation	Pay	Period		Nature of Duties	Major achievements
			From	To		

4. Innovative Service(s) introduced

- Service / Methods / Scheme
- a.
 - b.
 - c.

5. Publications / Presentations

- Articles published in International Journals : _____

- Articles published in National Journals :
- Papers presented in International Conferences / Seminars :
- Papers presented in National Conferences / Seminars :
- Books Published :
- Books Edited :
- Book Reviewed :

6. Conference / Seminars / Courses Attended

7. Conference / Seminar s / Courses organized / conducted

8. Invited Lectures delivered (in conferences / seminars / courses)

9. Membership details: Member of ...

- Editorial Board of a Journal
- Of a committee
- Professional bodies
- Any other

10. Research Guidance at various levels

- a. Master
- b. M.Phil
- c. Ph.D

11. Project(s) Undertaken and completed

12. Award / Medal / Citation / Honor / Fellowship Received

13. Professional Activities – in the capacity of

- Member of Professional bodies
- Office-bearer (Role) of Professional body

14. Country (ries) visited in official capacity and purpose thereof

15. Contribution to the profession (apart from the above)

16. Please give your self-assessment as to why you may be selected for this award (100 words)

17. Enclose two References (along with details of name, designation, complete address, E-mail and Telephone Number of the referees) who are holding the responsible positions. Among them, one should be the head of the institution/head of the department of the organization where the applicant is working.

18. Any other details to be considered

Declaration: Information given above are correct and true to the best of my knowledge.

Date:

Signature of the Applicant

Place:

Recommendation:

1. I hereby recommend Mr./Ms./Dr. _____ for the above award.

1. Name
2. Designation
3. Institution
4. Address
5. Email

6. Contact .No.

Date

Signature

2. I hereby recommend Mr./Ms./Dr. _____ for the above award.

1. Name
2. Designation
3. Institution
4. Address
5. Email

6. Contact No.

Date

Signature

About the Award: This award is sponsored AutoLib Software System, Chennai. The main aim of the award is to identify professionals who contribute more to our profession and recognize him/her.

Eligibility Criteria:

1. Applicant should be a citizen of India and below 40 years.
2. The applicant should be a working library professional who holds at least Bachelors degree in library science or its equivalent.
3. Interested professionals should apply in the prescribed application form
4. The application form can be obtained from the SALIS office or downloaded from the SALIS website. Downloaded application as per instructions given should reach SALIS office on or before prescribed date.
5. The decision of the committee constituted by SALIS to select the candidate for the award is final.
6. Award Committee has the right to post-pone or cancels the award for any unavoidable reason.
7. All correspondence should be addressed to the ‘ The President, 32G, 2nd Main Road, Sabari Nagar Extension, Mugalivakkam, Chennai – 600 125