



**Application Form for – ‘Gold Medal’
for Innovation in Open and Distance Learning – 2017**

1. **Name of the Principal Applicant¹** :
2. **Designation** :
3. **Organization** :
4. **Principal Applicant contact information** :
Office Address :
Phone (o) : **Mobile Phone** :
Email :
5. **Team members** (*include Name, Department and Email address*)
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6. **Innovation Title** :
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7. **Area in which Award is claimed** :

<input type="checkbox"/> Programme Development (<i>Including curriculum related contemporary development issues</i>)	<input type="checkbox"/> Administrative Facilitation
<input type="checkbox"/> Instructional Design and Delivery (<i>In all the aspects of ODL including print, e-content, audio, video and counselling, etc.</i>)	<input type="checkbox"/> Skill Development and Vocational Training
<input type="checkbox"/> MOOCs (Massive Open Online Courses)	<input type="checkbox"/> Industry-Institute Collaboration
<input type="checkbox"/> OER (Open Educational Resources)	<input type="checkbox"/> Disability Studies
<input type="checkbox"/> Learner Support, Monitoring and Feedback	<input type="checkbox"/> Inclusive Education
<input type="checkbox"/> Examination and Evaluation	<input type="checkbox"/> Any Other Relevant Area

¹In case of team work, the names of all the members need to be mentioned at Point No. 4 and the first member of the team will be principal applicant at Point No.1.

8. Brief summary of the Innovation (*Max 100 words*)

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9. Technological Features of the Innovation (*In case of no technology use, describe the common features of the Innovation*)

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10. Creative Breakthrough (*Outline the creative features of the innovation*)

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11. Implementation and Impact (*Please indicate how the innovation is implemented and what impact your innovation has or going to have on the ODL system*)

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12. Scalability of the Innovation

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13. Sustainability of the Innovation

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14. Relevance with the concept of ODL System

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15. Did you apply for this Award earlier? Yes/No. If yes, indicate specific progress/ advancement since last submission to Innovation Awards (If applicable)

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16. Explain in about 100-200 words why you think you qualify for this Award

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17. Declaration

I confirm that :	
<input type="checkbox"/> Information presented here is not confidential . <input type="checkbox"/> The work submitted is my/our original work. <input type="checkbox"/> Members of the innovation team and our institution, have been consulted, and agreed, to this submission.	
<i>Principal Applicant (name & designation)</i>	<i>Principal Applicant (signature)</i>
	<i>Date :</i>
<i>VC/Director/Head of Division or Institution (name)</i>	<i>VC/Director/Head of Division or Institution (signature)</i>
	<i>Date :</i>

Please forward **FIVE** hard copies of the filled in proforma and supporting materials through proper channel to the Director, NCIDE, G-Block, Zakir Hussain Bhawan, New Academic Complex, IGNOU, Maidan Garhi, New Delhi-110 068, by **June 25, 2018**. **Apart from this, you should also send softcopies of the proforma at ncide@ignou.ac.in**

If you have any questions please call 011-29536413 or email at ncide@ignou.ac.in