

 8th BUSINESS RESPONSIBILITY SUMMIT AND

PROJECT EXCELLENCE CONTEST & AWARDS

5TH AND 6TH AUGUST, 2021

**Directions:** Please complete this form and email us. All information in the form will be kept confidential and will only be used for evaluation process.

**Registration Form (A)**

Name of the Organisation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_

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Name of the Authorized person making the entry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Designation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (Direct) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**We wish to register for the Business Responsibility Summit and Project Excellence Contest & Awards in the following Category/ies (please tick the relevant entry Category/ies):**

* **Project on Covid related CSR Activities**

**(Implemented during the period 1/4 /2020 to 30/6/2021)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.no** | **Name of Project** | **Person In charge** |  **Mobile** | **Email Id** |
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* **Project on Non-Covid related CSR Activities (implemented during the period 1/4/2018 to 30/6/2021)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.no** | **Name of Project** | **Person In-charge** |  **Mobile** | **Email Id** |
|  |  |  |  |  |
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**Project Excellence Contest Participation Fee**

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| --- | --- | --- | --- |
| **Participation Fee** | **1 Project (Fee in INR)** | **2 Projects (Fee in INR)** | **3 & more Projects (Fee in INR)** |
| **Fee before GST** | Rs. 20,000 each  | Rs. 17,500 each  | Rs. 15,000 each |
| **Total Fee after GST @ 18% (per project)** | Rs. 23,600 each | Rs. 20,650 each | Rs. 17,700 each |

**AIMA GSTIN No.:** 07AAATA1644A1ZH                     **AIMA PAN No.:** AAATA 1644 A

**Key Dates:**

* Last date for submission of Narrative Write-up, PPT and Participation Fee    - **20 July 2021**
* Presentation of the shortlisted cases to the Jury for final round      **- End July 2021**

**Details / Procedure:**

* The participation fee can be paid online or through DD/Cheque.
* For Online Fee Payment [CLICK HERE](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fapps.aima.in%2FPAYAIMA%2FAIMA_PAYMENT_FILLDETAILS.ASPX&data=04%7C01%7Cdhanya.shankar%40endress.com%7C9be1cfc6fe5145c5ca3908d8e4476dcd%7C52daf2a93b734da4ac6a3f81adc92b7e%7C1%7C0%7C637510342725694518%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=%2B46NJh4i5eHhCK5ytJFiJWtdx9iuIuCWjBu0J3S02e0%3D&reserved=0)
* DD / Cheque towards participation fee should be drawn in favor of ***All India Management Association***, payable at New Delhi and must be couriered at All India Management Association, 14 Management House, Lodhi Road, New Delhi-110003.
* Delegate fee is non-refundable. Changes in nominations are acceptable.

**Signature \_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_**

**AIMA ICRC**

**Case Study Development**

**Undertaking by the Organization**

**Consent Form (B)**

In consideration of being a case study organization/author and in the interests of the facilitation of research at AIMA and elsewhere, we \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_( organization Name) hereby grant a non-exclusive, royalty free and perpetual license to AIMA on the following terms:

**a)** We undertake to submit the following Case Study/ies title

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to AIMA – India Case Research Centre and its Archives. Any abstract and case solution submitted with the said case study will be considered to form part of the Case Study.

**b)** AIMA is permitted to archive, reproduce and distribute our above listed case studies in whole or in part, and/or my abstract, in whole or in part (referred to collectively as the “Case Study”) anywhere in the world, in all the forms of media.

**c)** We represent that the above said Case Study is our original work, does not infringe any rights of others, including privacy rights, and that we have the right to make the grant conferred by this non-exclusive license.

-----OR-----

We do not wish to be publish our Case Study at AIMA India Case Research Centre ( ICRC)

|  |
| --- |
| Signature of the organization representative : |
| Date:Place:Email: |

**Consent Form (C)**

**UNDERTAKING**

I have read the rules and regulations and agree to comply with them. I understand that the Jury’s decision is final and that I will not enter into any dispute regarding this. I certify that all information provided by me in this form is correct to the best of my knowledge.

 **Name of Authorized Person**

 **Designation of Authorized Person**

**……………………………………………………………………..
Contact Us:**

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