



NOMINATE

Fields marked with * are Mandatory [Print](#) [Download Form](#)

Nominee (Contestant's Name)

| | |
|----------------------------------------------------|---------------------------------------------------|
| PLEASE SELECT THE CATEGORY YOU ARE NOMINATING FOR* | <input type="text" value="Select Category"/> |
| PAN Number* | <input type="text"/> |
| Nominee's Name* | <input type="text"/> |
| State* | <input type="text"/> |
| City/Tehsil/Village* | <input type="text"/> |
| Email* | <input type="text"/> |
| Nominee's No.* | <input type="text"/> |
| Postal address* | <input type="text"/> |
| PIN Code* | <input type="text"/> |
| Industry Type* | <input type="text" value="Select Industry Type"/> |
| Tell us about nominees business(200 word limit)* | <input type="text"/> Max. 200 words |

Nominator Info

| | |
|--------------------|-----------------------------------|
| Nominator Name* | <input type="text"/> |
| PAN Number* | <input type="text"/> |
| Contact No.* | <input type="text"/> |
| Email* | <input type="text"/> |
| Set Your Password* | <input type="text"/> |
| Captcha* | 1 + 6 = ? <input type="text"/> |

You may login back to edit details