

### **Entrepreneurship Development Hands on Training Program**

February 12-16, 2024



CSIR-Central Institute of Medicinal and Aromatic Plants (CSIR-CIMAP), a frontier plant research laboratory of the Council of Scientific and Industrial Research (CSIR), is steering multidisciplinary high-quality research in biological, agricultural and chemical sciences, and extending technologies and services to the farmers and entrepreneurs of medicinal and aromatic plants (MAPs). CSIR-CIMAP has made great progress in fundamental research, technology and product development, extension activities and human resource development and played a key role in positioning India as a global leader in production of mints, vetiver and other aromatic grasses, and in ensuring indigenous production of artemisinin - a WHO approved anti-malarial. CSIR-CIMAP has also played a key role in successfully commercializing an ayurvedic herbs-based anti-diabetic formulation, which has now benefitted millions.

#### **Important Dates:**

Training program dates: February 12-16, 2024

Last date for application submission (through email) extended up to: 8<sup>th</sup> February, 2024

# **Training Overview**

Development of micro-entrepreneurs by providing hands on training of manufacturing the research based FMCG herbal formulations

#### **CONTACT US**

#### **Director**

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**Course Coordinator** 

Dr. N. P. Yadav

**Principal Scientist** 

Bioprospection and Product Development

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# **Entrepreneurship Development Hands on Training Program**

## **Practical training on herbal products:**

- 1. Preparation of Aloe vera juice
- 2. Preparation of Rose water
- 3. Aloe vera Gel
- 4. Aloe vera Cream
- 5. Hands sanitizing Gel (as per WHO norms)
- 6. Insect Repellent Floor Mopping Scented Liquid
- 7. Mosquito Repellent Lotion





8. Natural Agarbatti

| Entry Qualification      | : | Graduation  |                                     |  |
|--------------------------|---|---|-------------------------------------|--|
| Mode of training program | : | Residential (Offline)   |                                     |  |
| Course curriculam        | : | Lecture and hands on training   |                                     |  |
| Date of training         | : | February 12-16, 2024  |                                     |  |
| Duration                 | : | 05 Days   |                                     |  |
| Seats                    | : | 25 (First come, first served basis)   |                                     |  |
| Registration fee         | : | Rs.10,000/ - per participant (who will not avail accommodation and food facility) Rs.14,000/ - per participant (who will avail accommodation and food facility) |                                     |  |
| Mode of Registration     | : | Interested candidates have to submit the Registration Form along with course fee (available on CIMAP website)   |                                     |  |
| Payment Mode             | : | The demand draft in favour of "Director, CSIR-CIMAP, Lucknow" payable at Lucknow or through online transfer.  |                                     |  |
|                          |   | Bank Details for online transfer-   |                                     |  |
|                          |   | Account No.   | : 30267691783                       |  |
|                          |   | Account holder  | : Director, CIMAP, Lucknow          |  |
|                          |   | Bank Address  | : State Bank of India, Main Branch, |  |
|                          |   | Dronah Cada   | Hazaratganj, Lucknow                |  |
|                          |   | Branch Code IFSC Code   | : 000125<br>: SBIN0000125           |  |
|                          |   | MICR Code   | : 226002002                         |  |
|                          |   | MICIC COUC  | . 220002002                         |  |
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|                          |   |   |                                     |  |

# Entrepreneurship Development Hands on Training Program [February 12-16, 2024]

## **Application Form**

| Candidate's Name (in capital letters):                    |                          |
|---|--------------------------|
| Address for correspondence:                               |                          |
| Date of Birth: Gender (M/                                 | F):                      |
| Mobile No   | mail id:                 |
| Educational qualification:                                |                          |
| Field of Specialization:                                  |                          |
| Payment Details (Demand draft/ online transfer):          |                          |
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|   |                          |
|   | (Signature of Applicant) |
| Date & Place:   |                          |
| Note: Kindly email the dully filled form to np.yadav@cima | ap.res.in                |

Contact Person: Dr. N. P. Yadav (Mob.9451244418)