

NATIONAL INSTITUTE OF INDIAN MEDICAL HERITAGE  
Central Council for Research in Ayurvedic Sciences  
Ministry of Ayush, Government of India  
Revenue Board Colony, Hyderabad 500036

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National Institute of Indian Medical Heritage (NIIMH), Hyderabad is functioning under Central Council for Research in Ayurvedic Sciences, Ministry of Ayush, Government of India. The Institute undertakes Literary Research and Medico-Historical Studies in Ayush Systems of Medicine. The Institute maintains Medico-Historical Museum, which has collections of medico-historical importance. A Medico-Historical Library housed in the Institute has significant collection of manuscripts, rare books and periodicals which serves as a reference material to scholars, academicians, historians etc., Further, the Institute maintains digitized repository of medical manuscripts and rare books pertaining to Ayush medical systems digitized by the Council.

A portal titled ‘AMAR – Ayush Manuscripts Advanced Repository’ a comprehensive electronic descriptive catalogue of Ayush Medical manuscripts digitized by CCRAS has been launched on 05-07-2021 for wider dissemination and is successfully maintained at the Institute.

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  - b. Duly signed Declaration Form (Form at Annexure 2).
  - c. Copy of ID card issued by Institute/ Organization.
  - d. Request letter from the Head of Institute (Format at Annexure 3).
5. Based on the above documents a, b, c and d (of S. No. 4), an invoice generated as per the rates (given at S.No.3) will be communicated to Researcher through e-mail.
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### REQUISITION FORM

1. **Name**
2. **Educational Qualification**
3. **Area of Specialization**       Ayurveda       Unani       Siddha       Homoeopathy  
 Sowa-Rigpa       Sanskrit       Others Specify
4. **Designation**
5. **Address**
6. **Email**
7. **Mobile**
8. **Head of the Department/ Institute, Address of Institution/ Organization**  
Name:  
Designation:  
Address:  
Email:  
Mobile:
9. **Details of the Requisite Manuscript**  
Name:      Accession Number in AMAR Portal:  
Alternative Name:      Mss. Material:  Palm leaf       Paper  
Author :      Language and Script:
10. **Purpose**       PG Dissertation       Ph.D. Dissertation       One of source for Critical edition  
 Publication of Article/ Book       Any other please specify

(Please enclose a copy of ID Card issued by Institute/ Organization. Kindly fill all the details, incomplete information in respect to any of above fields will not be considered for further process).

Signature of the Researcher: Name: Date	Signature of Head of Department/Institute/ Organization: Name: Date: Office Seal:
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I, Dr./Mr./Mrs....., PG/Ph.D. Scholar/ Faculty/.....

.....  
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- The manuscript will not be published in book form through any private publisher. The publication of manuscript in the form of book will be the sole right of CCRAS. The soft copies of final outcomes of research shall be provided to the NIIMH, Hyderabad on completion of the research study.

Signature of the Researcher

Date:  
Station:

Signature of Guide

Signature of the Head of the Institute  
along with seal

Date:

To

Assistant Director In-charge  
National Institute of Indian Medical Heritage  
Revenue Board Colony  
Hyderabad 500036  
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(Name)  
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