

India Packaging Awards 2026
Application form: Pilot Innovation Award

AWARD CATEGORY	DESCRIPTION
Excellence in Pilot Innovation Award	Recognizes early-stage packaging innovations validated through pilots or trials.
ELIGIBILITY CRITERIA	
<ol style="list-style-type: none"> 1. The participating entity must be registered in India with at least two years of operational presence as of March 31, 2026, and hold a valid GST/Incorporation or valid registration certificate. 2. The innovation must be early-stage and validated through at least one of the following: <ul style="list-style-type: none"> • Pilot implementation • Trial run • Proof-of-concept testing • Laboratory or simulated validation • Controlled field evaluation 3. The validation, pilot, or trial must have been conducted between April 01, 2024, and March 31, 2026. 4. The innovation must demonstrate clear applicability or relevance to pharmaceutical packaging, even if not yet commercially deployed. 5. Fully commercialized, mass-market solutions are not eligible for this category. 6. Concept-only ideas without testing, validation, or trial results are not eligible. 	
IMPORTANT RULES FOR PARTICIPATION	
<ol style="list-style-type: none"> 1. All questions must be answered. Incomplete forms will be disqualified and not shown to the jury for evaluation 2. The final eligibility of the nominees is subject to the <u>Terms & Conditions</u> 	

APPLICANT INFORMATION (FOR CORRESPONDENCE) *			
Name of applicant <i>(should be the authorized signatory)</i>		Designation	
Mobile Number		Email ID	
ENTITY INFORMATION*			
Name of the participating entity (Same will appear on trophy)			
Date of Incorporation	(DD / MM / YY)		

Registered address	City: _____ State: _____ Pin code: _____
Contact details	Telephone: Email: Company website:
Type of Organization	<ul style="list-style-type: none"> <input type="radio"/> Startup <input type="radio"/> Research Institute / Academic Institution <input type="radio"/> Pharmaceutical Company – R&D Team <input type="radio"/> Packaging Technology Firm <input type="radio"/> Packaging Material Innovator <input type="radio"/> Machinery / Automation / Engineering Firm <input type="radio"/> Other (Please specify): _____

CASE STUDY SECTION* PLEASE MENTION DETAILS PERTAINING TO THE PERIOD BETWEEN APRIL 01, 2024, TO MARCH 31, 2026, AND IN MAXIMUM 250 WORDS	
1 (a). Name of the innovation / project	
1 (b). One line summary of the initiative (Max 25 Words)	
1 (c). Stage of development:	<ul style="list-style-type: none"> <input type="radio"/> Early concept validated through lab testing <input type="radio"/> Pilot-scale testing completed <input type="radio"/> Trial conducted in simulated or controlled environment <input type="radio"/> Limited real-world evaluation completed
1 (d). Date when pilot / trial / validation was conducted	(DD / MM / YY)

2. What pharmaceutical packaging challenge does this innovation address, and what solution, technology, material, or system has been developed to solve it?

3. Describe the pilot, trial, or validation conducted for this innovation. Please include:

- Where and how the pilot or trial was conducted
- How performance was evaluated
- Key results, outcomes, or learnings from the pilot or trial

(Include performance indicators, observations, benchmarks, or comparative findings wherever possible.)

4. What is the future potential of this innovation for pharmaceutical packaging? How can it be scaled, commercially deployed, or further developed for real-world application?

List of the documents need to be provided			
S No.	Document Name	Description of document	Attachment
1	Incorporation/ GST Certificate (Mandatory)		Attach
2	Detailed Presentation/PDF/Document: Product images (Max 5), overview of the features, compliance highlights, market impact, and visuals (Mandatory)		Attach
3	Video Demonstration / Prototype Walkthrough (max 2 min (Optional)		Attach
4	Test Reports / Validation Data / Simulation Results (Optional)		Attach
5	Letters of Support / Collaboration References (Optional)		Attach
6	Any Other Supporting Document (Optional)		Attach

DECLARATION BY THE APPLICANT*	
<input type="checkbox"/> I hereby declare that the information provided in this application form is accurate and pertains to my business. I agree to abide by the Terms and Conditions of participation. I understand that if any information is found to be incomplete, incorrect, or false, the jury reserves the right to disqualify our entry.	
Name	
Designation	
Date	