ICOG-Emcure Pharma Travel Award

Applications are invited for **one ICOG-Emcure** Pharma**Travel Award** for this year from Members / Fellows of ICOG.

Qualifications and Requirements of the Applicant:

- Applicant should be below 40 years of age (Proof of age should be submitted).
- Applicant should possess MD / MS / DNB (Obst & Gyn) or any equivalent qualification.
 (Certified copy of the Certificate to be attached).
- Letter of acceptance as trainee.
- Brief Biodata.
- Letter of recommendation from PG Teacher, Head of Dept, President or Secretary of Society.
- 1 page summary of aims & objectives of the training
- March 31: Last Date

Award:

Candidate would like to take a **short term training of about 2-4 weeks anywhere in India.** Candidates must make their own arrangements for being accepted is trainee. After finishing the training, report from centre with photos should sent to office.

The amount of scholarship is Rs.35,000/- with the certificate will be given at the Convocation.

Application Form: ICOG EMCURE PharmaTravel AWARD

I	1.	NAME	:	Passport size photo
	2.	ADDRESS	:	

3.	AGE	:	4.	BIRTH DATE:
1.	Qualifications a	and any distinctio	n or prizes	in undergraduate o

Qualifications and any distinction or prizes in undergraduate or postgraduate examination:
 Number of attempts at MBBS / MS/ DNB (Obst & Gyn) or any equivalent qualification from Universities

(1st, 2nd & 3rd)

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III 1. Present appointment (Please furnish Proof):

IV 1. Previous posts held (Please furnish Proof):

V 1. Articles published (One reprint of each article must be sent)

a)Title	b) Name of	the Journal	c) No. & Date of Journal Issue.	d) Co-Authors if Any.

- Articles under publication (True copy of letter of acceptance must be submitted) along with short abstracts.:
- VII 1. Papers read at the All India Obstetric & Gynaecological Congress (prizes received in any, please furnish the letter from Organising Secretary of the Congress about reading the paper):
- VIII 1. Attendance at All India Obst & Gyn. Congress (Please furnish the letter of attendance from the Organising Secretary of the Congress). Number of Congress attended along with dates:
- IX 1. Research done if any
- X 1. Name of the Institution / Institutions and Hospitals and particular subjects in which candidate Would like to work (*Please give full details*) :
- XI 1. Any Additional Information :

Name of 2 references along with addresses:

Signature of the candidate

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NB: If the form is not complete, if will not be accepted. If the space in the form is insufficient for replies, kindly attach the same on separate paper.

Last Date: The application (in soft copy) in the prescribed format along with the details should send on ICOG Email on or before March 31.