## Indian Academy of Pediatric (IAP) Application Form for Admission to Fellowship Courses <u>Academic Year: 2022-2024</u>

Please Affix your passport size photograph

Application No. 2022 /.....

Sr.No	Name of training Center/ Institute/College	Name of Course
1		

I Confirm my intention to attend the study course in fellowship / Certificate Course. I accept the University's admission procedures and understand that the processing of personal information and documents is subject to the requirement of the data protection act.

1	Full Name of	the Applicant				
2	Address for C	Correspondence				
3	E-mail ID					
4	Mobile No.					
5	Gender					
6	Date of Birth					
7	Nationality					
8	Domicile					
9	Caste & Sub-	Caste				
10	Category					
11	Marital Statu	S				
12	Physically Ha	ndicapped				
	Educational Qualification:					
13	Whether Pos Degree Quali	t-Graduate Diploma / fication.				
	If Yes, no. of	Attempt(s)				
	Under-Gradu	ate Percentage				
Exam Pass		Name of Board /University	Name of Institute / College	Result / Attempts	Total Marks / Percentage	Grade
		II.	1	L		

14	Registered Practitioner details with respective State/ Central Registrations Council Completed?					
15	Experience Detail:					
	Name of	Doct Hold	Per	iod	Day Dataila	Reason for
	Institute	Post Held	From	То	Pay Details	Leaving

## **DECLARATION**

The above furnished information by me is correct and true to the best of knowledge and belief. If any information submitted here is incorrect, untrue or fraudulent, I understand that I am liable for Civil / Criminal action by the Authority.

Place:

Date: / / 2022

**Signature of Applicant** 

## **List of Documents: -**

- 1) Details of the Original documents to be submitted at the time of counselling at Training Centre along with two sets of self-attested photo copies by the candidate as per below:
- 2) An incomplete application form will be rejected.
- 3) Following self-attested photocopies are required to be submitted along with the form strictly in given order:

Sr.No.	List of Documents Required for IAP PHO Fellowship for A.Y. 2022-24			
1.	Identity Proof & address Proof (Aadhar Card/ Passport)			
2.	Passing / Degree Certificate and Mark list (s) of all qualifying examination			
	a) Higher Secondary Certificate (HSC) Examination Mark List,			
	b) Under Graduate (UG) Final Year Part- I & Part- II Mark List,			
	c) MD/ DNB Pediatrics Certificate			
3.	Valid Registration certificate from the Respective Council or attach renewal receipt.			
4.	Attempt Certificate (s) of all qualifying examinations in Post Graduate/ DNB/ Diploma/ Degree (as the case			
	may be) course from Head of the Institute (If applicable)			
5.	Gazette for change in name / Marriage Certificate (If applicable)			
6.	Experience Certificate of Professional work (teaching / non- teaching) Experience of being worked on the post			
	of Resident (Senior for PG degree / Diploma Holder & Junior for Graduate degree holder)/ tutor/ lecturer/			
	medical officer			
7.	Publication.			
8.	Presentations. 1) Oral 2) Poster			
9.	Awards if any.			
10.	Updated CV.			