APPLICATION FOR POST DOCTORAL CERTIFICATE COURSE in Onco Pathology (Under ICP)

1. PDCC applied for: _____

2. Name of the candidate
_____

3. Date of Birth:
_____

4. Address of correspondence
_____

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5. Email ID: ----------
Tel……
Mob……

6. Educational qualification:

Degree	College	University & Year	Division/Marks
MBBS			
MD			
Others			

7. Post MD Experience

Post	Place	From	To	Reason for leaving

8. Publications

Authors	Title	Journal

9. Presentations at conferences :

Title	Conference

10. Proposed project work during PDCC course (any 3 areas of interest)

Area of interest	Proposed title of project work

11. References: Details of 3 referees

Name	Place of work	Contact details Email and Mob No.

Kindly scan the filled application form and Email the same to:
pathfellowship@aims.amrita.edu
Phone Number 0484 – 2858020, 0484-6688020

12. Check list of certificate copies/other documents to be attached with scanned application form

1. Degree certificates
2. Medical council Registration
3. Experience certificates
4. Publications copy
5. Conference presentations certificates 6. ID Proof, PAN card, AADHAR card

Signature of candidate
Date: