

Indian Academy Of Pediatric (IAP)
Application Form for Admission to Fellowship Courses
Academic Year : 2019-2021

Application No. AY2019-2021/FPHO/.....

Please Affix
your Recent
Passport
size
photograph

**MCGM-Comprehensive Thalassemia Care ,Pediatric
Haematology-Oncology & Bone Marrow
Transplantation Centre, Borivali(E) ,Mumbai-400066
022-28541017/18**

1	Full Name of the Applicant	
2	Address for Correspondence	
3	E-mail ID	
4	Mobile No.	
5	Gender	
6	Date of Birth	
7	Nationality	
8	Domicile	
9	Marital status	
10	Physically Handicapped Yes/No	
11	Educational Qualification :	
	Whether Post-Graduate Diploma / Degree Qualification?	
	Number of Attempt(s)	

Exam Pass	Year of Passing	Name of Board / University	Name of Institute / College	Result / Attempt(s)	Total Marks / Percentage	Grade

12	Registered Practitioner details with respective State/Central Registrations Council Completed? Registration No.-	
13	Experience Detail :	
	Name of Institute	Post Held
		Period
		From
		To

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 : / / 2019

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 application form strictly in given order:

Sr. No	List of Documents Required for IAP PHO Fellowship for A.Y. 2019-21.
1.	Identity Proof & address Proof: a. 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 and Junior for Graduate degree holder) / tutor/ lecturer/ medical officer
7.	Publications

