APPLICATION FORM
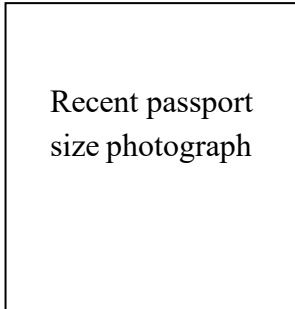
6-DAY CME FOR AYUSH TEACHERS
ON "DRAVYAGUNA: BASIC TO ADVANCEMENT"
Organized by Regional Ayurveda Research Institute, Pune
07/08/2023 to 12/08/2023
Sponsored by Rashtriya Ayurveda Vidyapeeth
(Ministry of AYUSH, Govt. of India, New Delhi)

To,

Research Officer In-charge,
Regional Ayurveda Research Institute,
Near Gandhi Bhawan, Kothrud, Pune, Maharashtra-411038

I hereby submit my application to participate in 6-day CME for AYUSH teachers being organized by your Institute. My details are as follows,

Full Name : ……………………………………….....
(In BLOCK letters)
Designation :……………………………………

Department :……………………………………

Name of Institution :………………………………………...

Date of Birth :……………………… Age: …….. Gender: ……

Recent passport size photograph

Educational Qualifications:

Name of Qualification/Degree	Subject	University/Institution

Registration number (NCISM/ State Council): ………………………………….

Aadhar number :…………………………………..
(Copy to be enclosed)
Experience :……………Years ……………months…………….

Have you participated in CME before? : YES/NO

If Yes, details of CME attended previously in Year2023:

CME	Organizing Institute	Dates (From- To)

Full address of participant for correspondence with Pin code:

1. Office   :

2. Residence   :

Mobile Number/ What's app no.: ………………………………………………..

E-mail ID :………………………………………………..

Undertaking

"I_____undertake that the information provided by me is correct to the best of knowledge and I have not concealed any relevant information. If the information provided by me is found false/inaccurate at any stage, I will be liable for disciplinary action (as the case may be) and recovery of funds spent against me if any"

Date: **Signature of the applicant**

Recommendation of Head of the Institute

The application of Dr. /Mr./Mrs./Ms._____

for 6-day CME is forwarded for consideration.

Signature of the Head of the Institute

Office Seal

Bank details (Attach a copy of passbook front page/cancelled cheque)

Name of Bank   :……………………………………………………………………

Branch   :……………………………………………………………………

Account number   :……………………………………………………………………

IFSC code   :……………………………………………………………………

Note:
1. The scanned   copy   of   this   application   form **along with s**elf-attested copies of PG degree certificate, Aadhar card & Institute Identity card should be uploaded   through   Google   form: https://forms.gle/PMKqznGJ5eLaUEtaA link on or before **21.07.2023 (accepted by online mode only).**
2. Application will not be considered: -
   ▪ If the information given above is incomplete in any respect
   ▪ If not recommended by the Head of the Institute