

**APPLICATION / NOMINATION FORM**

Capacity Building and Continuing Medical Education  
6-day AYUSH sponsored residential Training program in current trends in R&D, modern scientific advances & technology for scientific understanding for AYUSH Doctors / Scientists  
27<sup>th</sup> February to 4<sup>th</sup> March, 2023  
Organized by Central Ayurveda Research Institute, Kolkata

To  
Dr. A.K. Mangal  
Assistant Director In-charge  
Central Ayurveda Research Institute,  
4-CN Block, Sector-V, Bidhannagar  
Kolkata-700091.

I, hereby submit my application / nomination along with One-page CV to participate in 6- day AYUSH sponsored residential CME training program in current in R&D, modern scientific advances & technology for scientific understanding for AYUSH Doctors / Scientists by your Institute.

Full Name: ..... (in BLOCK letters)  
Father's/Husband's Name:.....  
Date of Birth: ..... Age: ..... Gender: .....  
Education Qualification:.....  
Designation: ..... Department: .....  
Name of Institute / Organization: .....  
Email Id (Institute): .....  
Full address for correspondence with pin code:  
1. Office: .....  
.....  
2. Residence: .....  
.....  
3. Mobile number: ..... Email ID: .....  
4. ID Card No. (Aadhar No.): .....  
5. Duration of service in present organization: ..... Years..... months  
6. Number of CME attended till date: .....

**Please enclose One Page CV and self attested copy of aadhaar**

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

Signature of Applicant

Date: .....

Recommendation of the Head of the Institution/College/Organization .....  
.....  
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Signature of Head of the Institute / College/ Organization with seal