NATIONAL NEONATOLOGY FORUM OF INDIA

803, 8th Floor, Northex Tower, Pitampura, New Delhi - 110034 (India)

Society Registration No. S/12637/1982

Photograph

APPLICATION FORM FOR DOCTORS TRAINEE FELLOWSHIP

Rules for selection of candidates

The National Neonatology Forum of India (NNF) shall award Trainee Fellowships every year to the members of the NNF who have completed training in Neonatology in NNF accredited centers anywhere in India. The National Neonatology Forum of India (NNF) shall award Trainee Fellowship every year to eligible candidates.

ELIGIBILITY:

- 1. Candidates should have passed MD/ DNB (Pediatrics) or DCH. The qualifications must have MCI recognition.
- 2. Tenure: For DNB/MD 1 year & For DCH 1 ½ year
- 3. Age no bar.
- 4. The applicant should categorically indicate that the training received by him/her will be of use to the Institution / private practice.
- 5. The candidate should clearly state in which centre he/she wishes to enroll. The candidate is expected to give his/ her preference for centers. The candidate will have to approach the Central NNF for registering along with a provisional letter of acceptance from the Head of Department under whom he/she will work. Candidate should attach photocopy of this degree/certificate required for eligibility in their application to central NNF secretariat. The application form should be countersigned and forwarded by the institution/guide.
- 6. The application will be invited through an announcement in NNF's publications / website or any other form like circular and the applicant will have to submit their NNF fellowship application form along with the *DD/Cheque of Rs. 17,700/- (fellowship candidate registration fee 15,000 + 18% GST extra) in favor of "National Neonatology Forum"* within a stipulated time to the NNF Secretary, 803, 8th Floor, A-9 Northex Tower, Pitampura, New Delhi 110034 (India)
- 7. The allotment of the centers would be intimated by the central NNF. Selection would be based on the recommendations of the Head of the department of individual centers with a concurrent approval of the NNF selection committee, which consists of president, secretary, president elect, past secretary and coordinators of states.
- 8. If candidates are unable to obtain the centers of their choice, they are at liberty to opt for other centers, where the seats are vacant.
- 9. It must be noted that the selected candidates would be subjected to the rules and regulations of the individual training centers regarding accommodation, library fees, messing etc.
- 10. It is preferable for the candidate to possess independent medical indemnity insurance, before joining for the course.
- 11. Admission process interview at local center, admission through central registration



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APPLICATION FORM FOR DOCTORS TRAINEE FELLOWSHIP

1. Personal Information

Surname	Middle Name			First Name	
Gender	0	Male	0	Female	
Date of Birth	Date		Month	Year	
Marital Status	0	Single	O Married		
2. Conto	ct Det	ails			
Address					
				Pin code	
Telephone	Home _		Office	Mobile	
Email Address					
NNF Membersl (Attach Copy)			MCI No (Attach Copy)	D/M/Y Joining of Fellowship	
3. Conto	ct Det	ails of Inst	itution		
Name of train	ing hos	oital			
Address					
				Pin code	
Telephone	Home _		Office	Mobile	
Email address _					
Name of Obser	ver				

Medical / Pediatric Qualification	Name of the University	Qualifying Dat
		<u>.</u>
6. Appointments held ti		Teaching /
	Il date:	Teaching / Non-Teaching
		_
		_
		_
S.No Designation		_
S.No Designation Details of Payment:		Non-Teaching
S.No Designation Details of Payment: Cash/ Cheque/D.D. No./NEFT	Period	Non-Teaching Date
S.No Designation Details of Payment: Cash/ Cheque/D.D. No./NEFT	Period	Non-Teaching Date

Bank Name: Canara Bank

Branch: DTC Wazirpur, New Delhi-110035

IFSC Code: CNRB0019119

MICR: 110015402

Account Name: National Neonatology Forum

Type of account: Current

7. Neonatal training after PG if any from India or Abroad:
8. Any other skill training in related fields:
9. Number of publications (attach list):
10. Research presentations made in various scientific meetings (name of conference, title of paper, year – attach list):
11. Enclose a letter of acceptance by the training institution
12. Give justifications for the training sought
Certified that the above particulars are correct
(Signature of Applicant)
Place:
Date: