

INDIAN COLLEGE OF OBSTETRICIANS & GYNAECOLOGISTS

of

The Federation of Obstetric & Gynaecological Societies of IndiaModel Residency Co-op.Hsg.Society, 605, Bapurao Jagtap Marg, Jacob Circle,
Mahalaxmi East, Mumbai 400 011.

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Passport
size
Photo**Application for International Fellowship**

I desire to be an International Fellow of the Indian College of Obstetricians & Gynaecologists. I hereby apply for the same. I am paying the Fellowship fee in advance. If duly elected, I shall abide by all the rules and regulations of the College. I hereby furnish my bio-data.

Date of Application _____ Date of Receipt _____
(By Office) Signature of Applicant

Name (in Capital) _____
(Surname) (First Name) (Middle Name)

Degrees & Diplomas	University / College / Institution	Year of Qualifying

Experience in India :

Position	Medical College / University	Duration	Years ___ to ___

Current Position :

Position	Medical College / University	Duration

Permanent Address _____

_____ Pin Code No. _____

Telephone Nos. _____
(Residence) (Office) (Mobile)

Fax No. _____ **Email :** _____

Date of Birth _____

Medical Council Registration Number and date,
mentioning the name of the State Register _____

Years of practice in Obstetrics & Gynaecology and / or Research in any aspect of
Human Reproduction _____

State / National/ International Conferences Attended: (Use additional Sheet of paper, if required)

Year	Place	Which Congress

Papers presented as FIRST Author at State / National / International Congresses
(Use additional Sheet of paper, if required)

Year	Place	Title

