

INDIRA GANDHI INSTITUTE OF MEDICAL SCIENCES: SHEIKHPURA: PATNA-14 (APPLICATION FORM FOR ASSESSMENT PROOMOTION FOR FACULTY MEMBER)

(Please fill this pro-forma neatly typed: 08 Copies)

Date of Birth		
Date of Birth		
Yes/No/Not Applicable		
YearsMonths		
Present Basic Pay with Pay Scale:		
n & Research Wo Under Publication	ork (Give Number Only 1 st Author/Communicat <u>Author</u>	
r supervision: Both (
Under Submission		
rom	To	

01.	Research Projects as Chief Investigator Source of Funding:	Year:	Total Amount			
02	Award, Fellowship and memberships of Professional bodies					
03	Membership of Educational Board of Indexed International Journals/Review Committee of National Bodies and Intuitions.					
04	Services: Contributions made towards the development of new Univ./ Speciality/Laboratory/ Facility/Programme/ Therapeutic / or Diagnostic Procedures developed or patients taken (Enclosed evidence)					
05	Contribution in Community & National Programme.					
06	Describe your most notable contribution in Teaching & Research in 200 words					
IMPO	IMPORTANT: I hereby declare that the information given by me in the pro-forma is correct to the best of my knowledge.					

Name: Signature