

INDIAN ACADEMY OF CYTOLOGISTS
APPLICATION FORM FOR FELLOWSHIP IN CYTOPATHOLOGY

I. General Information

Name and Mailing Address
(In Block letters)

Particulars of the present post

- (a) Temporary / Permanent
- (b) Designation
- (c) Name of Employer / Institution
- (d) Duration

II. Details of Post Graduate Qualification

Examination Passed	College and University	Year	Attempt
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Prizes/ Fellowships awarded in
Past
(Name & Year)

III Post held with dates

- (a)
- (b)
- (c)

Type of work in Cytology done till now and experience gained:

- (a)
- (b)
- (c)

IV Furnish information on training desired

- (a) Name, Designation and Address of supervisor

- (b) Attach the original letter of acceptance from the supervisor of the proposed centre of work

V Facilities for cytological work available in your own department

- (a) Staff working in the Cytology Laboratory / Unit etc.

- (b) Number and nature of smears seen every year (Give information for last three years)

- (c) Any special features

Place:
Dated:

(Signature of Applicant)

CERTIFICATE

Certified that the candidates sponsored for the Cytology fellowship will, on completion of training, be absorbed in his / her present / equivalent / superior post. In the same department / institution and will be given work to utilize the training.

Place:
Dated:

(Head of the Institution / Organisation)

**FELLOWSHIPS FOR TRAINING OFFERED BY INDIAN ACADEMY OF
CYTOLOGISTS TO PATHOLOGISTS FOR TRAINING IN CYTOLOGY**

- (1) Training in Cytopathology is offered to pathologists with MD Pathology, DNB Pathology or equivalent degree..
- (2) Rs 20,000/- (Twenty thousand only) will be paid at the end of one month training, on receipt of completion certificate from the relevant authority of the training centre.
- (3) Training centre must be chosen from the list enclosed and it will be candidate's responsibility to be accepted by the centre.
- (4) No separate amount for Lodging and boarding etc. are paid.
- (5) Specific application form should be used.
- (6) Selected candidate shall be informed by email.
- (7) Please send the application form duly filled and signed, along with the annexures, to Dr. Dev Prasoona, Secretary IAC, Consultant Pathologist, Dr. Prasoona's Diagnostic Centre, Bhagat Singh Chowk, Narayan Das Road, Munger 811201, Bihar.

