To,
The Principal

Respected sir/madam,

Subject: Inviting Application for Continuing Medical Education (CME) Programme In Dravyaguna **Ref:** 65-239/RAV/2013-14/E & C/1497 Dated 24/03/2014

We are happy to inform you that Ministry of Health and Family Welfare, Dept. of Ayush and RAV. New Delhi has sanctioned us 6 day CME programme in the subject of Dravyaguna.

We kindly request you to send filled application in attached prescribed proforma of maximum 02 participants from your institution for 6 days CME programme. The maximum number of seats is limited to 30 and selection will be on the basis of first come first serve. The participants can also submit application through e-mail as advance copy.

Subject	Date	Last date	Co-ordinator	Organizing	e-mail
of CME		for submission		Secretary	
_	09-06-2014		Dr.S.B.Chougala	Dr.Sanjeev Athani	1 10010 1
Dravyaguna	То	25-05-2014	09449290586	09481403126	amcgpb_1996@yahoo.com
	14-06-2014				

Dept. of AYUSH Guidelines:

- 1. Teaching faculty working in Ayurvedic College in concerned subject i.e Dravyaguna can apply.
- 2. A teacher of concern subject working in institution should apply in the enclosed application form duly certified by the head of the institution.
- 3. No amount will be paid to trainees except the reimbursement of travelling expenses, that too on actual basis as per the rules subject to ceiling.
- 4. The payment of TA will be made only on production of original tickets by the trainees or resource person.
- 5. Places where connected by train, will be reimbursed with actual fare limited to AC 2 tier or actual claim, whichever is less.
- 6. Road mileage is allowed only for places not connected by train.
- 7. We will be arranging food and accommodation for selected trainees in the nearby premises of the institution, as per the rule of dept. of AYUSH and Govt. of India.

Note:

- 1. Participants are requested for early response.
- 2. For further information, it is requested to communicate the organizing secretary/co-ordinator of the programme.
- 3. For more details please visit <u>www.sjgchsamcghataprabha.org</u>

Organizing Secretary Principal

Application form for the CME - Dravyaguna

Dept. of Dravyaguna

Shri J.G.C.H.S. Ayurvedic Medical College, Ghataprabha - 591310 Tq:Gokak Dist:Belgaum Karnataka

To, The Principal, Shri J.G.C.H. Society's Ayurvedic Medical College, Ghataprabha – 591310

Affix recent passport size photo duly attested

Respected Sir,

Name:

Date of Birth

I hereby apply to participate in the scheduled CME program on Dravyaguna by your institution.

	Designation :	
	Qualification:	
	Department :	
	Name of the College :	
	Registration No. :	
	Teaching Experience :	
	Office Address:	
	Residential Address:	
	Contact No. :	
	E-mail Address :	
	Details of ROTP/CME attended:	
	ereby declare that, the abo	ove information given by me is true & correct as per the best of my
Da	te:	Signature of Applicant
		Signature of Head of the Institution with seal