

Application form for **FELLOW** of the Association

**INDIAN ASSOCIATION OF VETERINARY PUBLIC HEALTH  
SPECIALISTS**

**BIO DATA**

1. Name in full:  
(Surname followed by forename)
2. Date of Birth:
3. Field of specialisation  
:
4. Designation:
5. Address: (a) Official: Tel. No.:  
Fax No.:  
E-mail  
Address:

*Space for Passport size  
colour photograph*

(b) Residential: Tel. No.:

Address:

6. Academic career and professional attainments

(a)	Degree	University/Institution	Year	% marks	Distinction, if any

b) Specialised training having relevance to VPH (List five most relevant

c) Position Held

Position	Duration	Institution

---

d) Special attainments indicating new knowledge generated, patents/technologies developed, books published and human resource development activities carried out.  
(List up to 10 significant achievements in the field of veterinary public health)

---

---

e) Awards received

i) International

ii) National

iii) Any other

---

f) Publications:

(i) List below ten most important publications in the field of veterinary public health: indicating (a) name of author(s), (b) year, (c) title, (d) name of journal, volume no. and page nos.

List of Publications	Remarks by IAVPHS

(ii) Please attach the full list of publications (Only those published in referred journals. Do not include papers presented in conferences/ seminars etc.)

7. Participation in the activities of IAVPHS

1. Date of becoming life member:
2. Conferences attended:
3. Life members enrolled:
4. Other activities:

**Declaration**

I declare that no vigilance / disciplinary proceedings are pending against me.

Signature of the Nominee