



INDIAN ASSOCIATION OF ENDOCRINE SURGEONS
(A Section of the Association of Surgeons of India)
ELECTION FOR THE YEAR 2017-18



NOMINATION FORM

(Filled up nomination form to be sent Dr. S.Babu H-70, New H.I.G. House, Anna Nagar, Madurai Tamilnadu- 625 020 Mobile: 09442119573)

I, Dr..... Member
 (IAES Membership No.....) of the Indian Association of
 Endocrine Surgeons (ASI Membership No.....) propose
 Dr..... (IAES Membership No.....& ASI
 Membership No.....) for the post of President of the Indian Association of
 Endocrine Surgeons for the year 2017-2018

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Seconded by (Signature) Name in Capital letters IAES Membership No. ASI Membership No. Full Residential Address : | Signature of Proposer Name in Capital letters IAES Membership No. ASI Membership No. Full Residential Address : |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PIN Code..... PIN Code.....

Station : Station :
 Date : Date :

I agree to serve as President of Indian Association of Endocrine Surgeons
 For the year 2017-2018 if elected.

Signature & Name in Capital letters
 Station : Date :
 ASI No..... Valid Membership from.....
 IAES No..... Valid Membership from.....
 Full Address :
 Tel. No.....Mobile No.....E-mail.....



INDIAN ASSOCIATION OF ENDOCRINE SURGEONS

(A Section of the Association of Surgeons of India)

Secretariat: Department of Endocrine Surgery, Shatabdi Hospital Phase-2, 7th floor
King George's Medical University, Lucknow . 226003 U.P. India.
Mobile No: - 9415007391 Email: - mishra101@gmail.com Website: - www.iaes.org.in



CALL FOR ELECTION – 2017-2018

for **President Elect 2017-18 (President 2018-19)**

Dear Esteemed members

Greetings to you

There will be election for the post of President Elect of our Indian Association of Endocrine Surgeons for the year **2017-18 (President 2018-19)**

President Elect 2017-18 – One post.

Eligibility: The candidate should be a member of A.S.I. and I.A.E.S. for a **minimum period of five years.**

IAES members in good standing can be proposed and seconded for the above post by two other IAES members in good standing. The member being proposed must give his/her acceptance to serve for the proposed post if elected. The enclosed nomination form or its photo copy alone should be used. A non-refundable nomination fee of Rs. 5000 will be collected from all contestants applying for the post of President Elect.

The Nomination fees should be sent as **Demand Draft Only** (Cheques will not be accepted) along with the duly filled Nomination form. The Demand Draft should be drawn in favour of “Indian Association of Endocrine Surgeons” payable at Chennai. The Nomination form without the Demand Draft for the correct denomination for the appropriate post being applied will be rejected. All the nomination forms will be scrutinized and approved by the Election Officer. Incomplete nomination forms will be rejected.

Kindly send the completed Nomination form alongwith Demand Draft to :

Dr. S. Babu
President Elect and Election Officer
Indian Association of Endocrine Surgeons
H-70, New H.I.G. House, Anna Nagar, Madurai
Tamilnadu – 625020
Mobile No – 09442119573
E-mail- sbabu459@gmail.com

- **The Last date for receiving the filled up nomination form is on or before 31st July 2017.**
- **The Last date for withdrawal of the nomination is on or before 7th August 2017.**
- **Election if necessary will be conducted by secret ballot at the General Body Meeting of IAES on 13th October 2017 at IAESSCON 2017, Puri.**
- **The eligible candidate should be present in the floor of the house, otherwise his nomination will be rejected.**
- **Only members enrolled on or before 31.05.2017 will be eligible to vote.**

Yours Sincerely



(Dr. S. Babu)

President Elect and Election Officer 2017

6th June, 2017
Lucknow



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RULES AND REGULATIONS OF THE FELLOWSHIP (FAES)

1. Surgeons holding recognized post graduate degree in General Surgery will be eligible.
2. After obtaining Post Graduate degree in surgery, he/she to be in active practice for a minimum period of two years.
3. He/She should be a life member of ASI.
4. He/She should be a life member of IAES for a period of two years.
5. He/She should have attended two Annual conferences of IAES.
6. Fellowship fee and certificate fee for surgeons in India and SAARC countries will be Rs. 7,750/- (Rupees seven thousands seven hundred and fifty only). Fellowship fee for surgeons practicing abroad will be US\$ 500 or equivalent. Surgeons with FAES will be eligible to participate in all scientific activities of IAES by paying registration fee.
7. Duly completed application has to be forwarded along with a demand draft for Rs. 7,750/- (Fellowship fee Rs. 7,750/- + Certificate fee Rs. 250/-) by Indian Surgeons and Surgeons in SAARC Countries and US\$ 500 for Surgeons of other countries. The demand draft should be drawn in favour of "**Indian Association of Endocrine Surgeons**" Payable at **Chennai**. Application form should be sent along with Xerox copy of graduation certificate, post-graduation certificate and copies of other relevant certificate.
8. The application should be sent to Honorary Secretary IAES on or before 31st August 2017.
9. For final selection for the Fellowship one has to appear before the Credential Committee on 13th October 2017 at IAESCON 2017, Puri.
10. No exemption is given from appearing before the Credential Committee.

6th June, 2017
Lucknow

Yours Sincerely

(Dr. Anand Kumar Mishra)
Honorary Secretary

Instructions for filling up Application

1. Fill all items in Chronological Order.
2. Each items on the application form must be filled. If there are no details to be given, mention “Nil” or “Not Applicable” as the case may be
3. Affix one autographed photograph in the place provided in the Application form. Include one additional Photograph along with application for office use
4. Mention all medical qualification (in item 5) including fellowship from other professional bodies. Please attach attested photo copies of all relevant certificates.
5. Item 9 refers to all surgical experiences gained after Post Graduation.
6. Attach additional sheets if needed.
7. Enclose a DD for Rs. 7,750/- (Fellowship fee Rs. 7,500/- + Certificate fee Rs. 250/-) in favour of “Indian Association of Endocrine Surgeons” payable at Chennai
8. The duly filled up application form with relevant certificate and enclosures to be sent to the Honorary Secretary, IAES.



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Application for Fellowship of Indian Association of Endocrine Surgeons (FAES)

Please refer to instruction before filling up the application form

Please Type or Print in Capitals

1. Name :

2. a) Address
(Permanent) :

:

:

PIN.....Tel. No.....

E-mail :

b) Address for :

(Correspondence)

.....

PIN.....Tel. No.....

(Mobile)

3. Date of Birth :

4. Medical Registration Number: State.....

Year.....

5. Qualification :

| Sl. No. | Degree/Diploma | University/Board | Year |
|---------|----------------|------------------|------|
| | | | |
| | | | |
| | | | |
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| | | | |

6. ASI Membership Number – Full Annual/ Full Life Member :

7. IAES Member Number :

8. Membership of Medical Societies:

| S. No. | Organisation | Membership No. | Year |
|---------------|---------------------|-----------------------|-------------|
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9. Surgical Experience after Post graduate (in chronological order) :

| S.No. | Designation | Institution | From | To |
|--------------|--------------------|--------------------|-------------|-----------|
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10. Awards/Honours:

| S. No. | Awards | Year |
|---------------|---------------|-------------|
| | | |
| | | |

11. Research / Experimental Work:

| S. No. | Subject | Institution | Duration |
|--------|---------|-------------|----------|
| | | | |
| | | | |

12. Academic Achievements (Papers Presented/ Published) :

| S.No. | Subject | Journal | Year |
|-------|---------|---------|------|
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| | | | |
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13. Conferences Attended (Last Five Years) :

| S.No. | Subject | Conference / Seminar | Year |
|-------|---------|----------------------|------|
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| | | | |
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Details of DD for Rs. 7,750/- enclosed : DD No.....

Bank.....

DECLARATION BY THE APPLICANT

I, Dr.....hereby declare that all the information above are correct. Would like to apply for Fellowship of Indian Association of Endocrine Surgeons (FAES). I agree to abide by the rules and regulation of Indian Association of Endocrine Surgeons as may be enacted from time to time.

Date :

Place :

Signature

RECOMMENDATION FOR FELLOWSHIP (FAES)

Dr. is a practicing Surgeon for the last year He is recommended for the award of Fellowship of Indian Association of Endocrine Surgeon (FAES).

| | |
|---------------------------|---------------------------|
| 1. Signature | 2. Signature |
| Name | Name |
| Designation | Designation |
| ASI No. IAES No..... | ASI No. IAES No..... |
| Address | Address |
| | |
| | |
| | |

Date: Date:

*Recommendation should be done only by two Surgeons of not less than five years standing. It is mandatory for the recommending Surgeon to be a member of both ASI and IAES. In case of Surgeons living outside India, it is enough if this recommendation is signed by any two Surgeons.

FOR OFFICE USE ONLY

Name: Dr.

Application received on:

DD No.: Date: Band :

Documents: Complete/Incomplete

Recommendation of the FAES Committee: Accepted/Deferred/Rejected

Final Approval-Convenor, FAES Committee: Admitted/Not Admitted

Date:.....

Signature of Honorary Secretary
India Association of Endocrine Surgeons