

INTERNATIONAL SCHOOL OF ONCOLOGY
DEPARTMENT OF PATHOLOGY & LAB MEDICINE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL, M.P., INDIA

Registration/ Application Form

1. Name :
2. Gender, Age :
3. Address :
4. City :
5. State :
6. Country :
7. Pin/Zip Code :
8. *Contact No. : *Mobile No.
9. *E-mail :
10. I am in Semester/Prof :
11. Name & Address of
current education Inst.
of applicant :
12. Name of University
with Address :
13. Mother Tongue :
14. Fee Details : NEFT/RTGS:..... DD/Cheque:.....
Transaction No..... DD/Cheque No.

Date :

The Registration/Application fee to the programme is Rs. 150 (US \$10 or equivalent).

The amount should be deposited in the

Account Name: Pathology Teaching & Training Forum,

Account No. 45340100000519,

Bank Name: Bank of Baroda, AIIMS Bhopal Branch,

IFSC Code: BARB0AIIMSX. (fifth character is zero)

Note: Account details for deposit of course fee Rs 3500 shall be uploaded on website after final list of selected participants is declared.

The information furnished above is true and if any discrepancy is found at any time, would make me liable to disqualification.

Signature of applicant:

Name of applicant:

*To be filled carefully as all further communication would be through these.

Email a copy of the completed application and payment to email-id:isoaiimsbpl2019@gmail.com

- Cc to : head.patho@aiimsbhopal.edu.in