



APPLICATION FORM FOR ASSOCIATE-FELLOWSHIP (Assoc.-FAMS)

**INSTRUCTIONS & GUIDELINES FOR FILLING ONLINE APPLICATION FORM FOR ASSOCIATE-FELLOWSHIP (Assoc.-FAMS)**

**I. IMPORTANT INSTRUCTIONS**

1. Before starting to fill up the on-line application, it is advisable to download the sample form for ASSOCIATE-Fellowship category.
2. Please ensure eligibility criteria are fulfilled.
3. An Applicant of eminence from any field of Basic sciences, Medicine, Surgery, Biomedical sciences can be nominated for the award of **Assoc.-FAMS**.
4. Please get the Proposer, Secunder part of the application form **download it from Homepage** dully filled up and signed by them **BEFORE STARTING** to fill up the ONLINE application form.
5. Please read the GUIDELINES given below carefully before filling up the application form.
6. There will be NO modifications after the FINAL submission of the online application form. However, if an applicant has incomplete application and has NOT made FINAL Submission, the same can be completed/ modified using Aadhar number and mobile number already entered in the application form, **BEFORE** the LAST date.
7. **Please keep the scanned copies of all the supportive documents ready before starting to fill up the application form online. These documents should be in PDF, JPG, JPEG, PNG format of maximum size of each file should be  $\leq 500KB$ .**

**This will save your time. PLEASE NOTE that the online application form will move forward ONLY when you have uploaded the relevant documents.**

8. **Please fill up your details FIRST on the downloaded SAMPLE application form (From Homepage) and then fill up your ONLINE application.**

**II. GENERAL GUIDELINES**

**1. Eligibility Criteria**

The eligibility criteria for selection to Associate Fellow are as under:

- 1.1. Age of the applicant should be up to **45 years of age**.
- 1.2. Should have the degree of DM or MCh or Dr.NB (Doctorate of National Board for super specialty)
- 1.3. Should be serving in Medical College, Teaching hospital or Consultant in a corporate hospital.
- 1.4. Minimum 3 publications in index journal.
- 1.5. The Applicant should be an Indian citizen.
- 1.6. The Applicant should provide an undertaking that there is no **proven case** for ethical misconduct in research or research publication against him/her.



APPLICATION FORM FOR ASSOCIATE-FELLOWSHIP (Assoc.-FAMS)

2. Please keep ready all scanned documents / self-attested certificates for uploading;
  - 2.1 Qualification certificates
  - 2.2 Supporting documents for marks claimed in the application form.
  - 2.3 Signed statement in application form from the Proposer and Seconder.
3. Valid Email ID & mobile number valid for at least next one year.
4. **The supporting self-attested scanned documents for upload should be in .jpg, .jpeg, .png, pdf format with maximum size of each file  $\leq$  500KB**
5. **It is advisable to download the Propose & Seconder form from homepage.** Proposer & Seconder signature are to be obtained on the printed downloaded form.
6. Assistance for editing -In case you wish to edit any information pertaining to Personal Details, and Qualification Details:
  - 6.1 log in again with same credentials; using same Aadhar Card and Mobile number at the time of new registration.
  - 6.2 Make sure to save the information again by clicking the button “Final Submit” in the end.
  - 6.3 Once complete application form is FINAL submitted, no changes can be made.
7. Applicants are required to fill all the parameters completely before clicking FINAL Submit Button.
8. Self-Attested Documents should be uploaded as per the format prescribed, duly completed for each field for which marks have been claimed.
9. **Guidelines for the NAMS Fellows who is proposing & seconding Applicant;**
  - 9.1 Only Fellows of the NAMS can propose and second the Applicant's
  - 9.2 Members of the Council (elected and Ex-officio) and Members of the Credentials Committee are not eligible to propose or second any name of Applicant.
  - 9.3 A Fellow can propose FIVE names for Associate Fellowship in a year. He may, however, second any number of proposals.
  - 9.4 The proposer should preferably be from within the same specialty to which the person nominated belongs and seconded can be from any specialty/ discipline.
  - 9.5 Scanned Signed page of Proposer & Seconder signature of the printed downloaded form.
  - 9.6 Scanned precise statement limited to 300 words on Applicant's primary research field, other research area and any other significant scientific contribution



APPLICATION FORM FOR ASSOCIATE-FELLOWSHIP (Assoc.-FAMS)

**10. Other Instructions for Hard Copy of Application Form:**

- 10.1 Online submission and one hard copy of the same along with the uplodged documents must accompany the application.
- 10.2 **The hard copy should have page number and index of content page.**
- 10.3 Self-attested photocopies as proof for each educational qualification and administrative Experience.
- 10.4 Please give Citation index of your publication as First Author or as Corresponding Author during last 10 years.

**APPLICATIONS WHICH ARE INCOMPLETE OR NOT ACCORDING TO THE PRESCRIBED FORMAT WILL NOT BE PROCESSED AND CONSIDERED.**

To be returned duly completed to **The Secretary NAMS House, Ansari Nagar, Ring Road, New Delhi – 110029.**

**Note: - While applying, the Applicant should ensure that he / she fulfils all the eligibility criteria given herein and particulars furnished are correct in all respect.**

**In case, it is found at any stage of selection that a applicant does not fulfil the eligibility criteria and / or that he / she has furnished any incorrect / false information or has suppressed any material fact(s), his / her candidature will stand automatically cancelled.**

**If any of the above shortcoming(s) is / are detected even after the conferment, his / her fellowship of NAMS will be terminated without any notice.**

**Clarification, if any required, may be addressed to Secretary, NAMS at email-ID [nams\\_aca@yahoo.com](mailto:nams_aca@yahoo.com)**



APPLICATION FORM FOR ASSOCIATE-FELLOWSHIP (Assoc.-FAMS)  
APPENDIX - I COMPOSITION OF GROUPS

**GROUP-A: BASIC MEDICAL SUBJECTS**

**Code No.**

- BS 01 Anatomy
- BS 02 Biochemistry
- BS 03 Biomedical Engineering
- BS 04 Biophysics
- BS 05 Biotechnology
- BS 06 Forensic Medicine
- BS 07 Genetics
- BS 08 Haematology
- BS 09 Microbiology
- BS 10 Molecular Biology
- BS 11 Pathology
- BS 12 Pharmacology
- BS 13 Physiology

**GROUP-B: MEDICINE AND ALLIED SUBJECTS**

**Code No.**

- MA 01 Anaesthesiology
- MA 02 Cardiology
- MA 03 Clinical Immunology
- MA 04 Clinical Pharmacology
- MA 05 Dermatology & Venereology
- MA 06 Endocrinology
- MA 07 Gastroenterology/Hepatology
- MA 08 Internal Medicine
- MA 09 Medical Oncology
- MA 10 Neonatology
- MA 11 Nephrology
- MA 12 Neurology
- MA 13 Nuclear Medicine
- MA 14 Paediatrics
- MA 15 Psychiatry
- MA 16 Radiodiagnosis
- MA 17 Radiotherapy
- MA 18 Respiratory Medicine
- MA 19 Rheumatology
- MA 20 Transfusion Medicine

**GROUP-C: SURGERY AND ALLIED SUBJECTS  
MEDICAL**

**Code No.**

- SA 01 Cardiovascular & Thoracic Surgery
- SA 02 Dental Surgery ~~and Allied disciplines~~
- SA 03 Gastrointestinal Surgery
- SA 04 Neurosurgery
  
- SA 05 Otorhinolaryngology
- SA 06 Paediatric Surgery
- SA 07 Physical Medicine & Rehabilitation
- SA 08 Plastic Surgery
- SA 09 General Surgery
- SA 10 Surgical Oncology
- SA 11 Obstetrics & Gynaecology
- SA 12 Ophthalmology
- SA 13 Orthopaedic Surgery
- SA 14 Urology

**GROUP-D: COMMUNITY HEALTH/  
EDUCATION / HOSPITAL**

**Code No.**

- CHA 01 Biostatistics
- CHA 02 Clinical Epidemiology
- CHA 03 Community Health/Community  
Medicine/Social & Preventive Medicine
  
- CHA 04 General Practice/Family Medicine
- CHA 05 Hospital Administration
- CHA 06 Maternal and Child Health
- CHA 07 Medical Education
- CHA 08 Nutrition
- CHA 09 Occupational and Environmental
  
- CHA 10 Public Health and Health Education
- CHA 11 Health Planning and Health

**Group E - Removed**