



(OPTIONAL)

APPLICATION FORM FOR FELLOWSHIP OF NAMS (FAMS) ADVANCEMENT CATAGORY

Sample form for Proposer & Seconder with their Statement page→before filling the form download it from guidelines page, fill it in advance for uploading

The undersigned Fellows of the National Academy of Medical Sciences (India) respectively propose and second the herein-named for nomination as a Fellow to the Academy

PROPOSER DETAILS

<b>Proposer Signature (NAMS Fellow)</b>	
<b>Name (in Block letter)</b>	
<b>Mailing Address</b>	
<b>Contact Number</b>	
<b>E Mail</b>	
<b>Date on which the proposer made it</b>	
<b>FAMS code number*</b>	
<b>Year of FAMS</b>	
<b>Speciality of the Proposer</b>	
<b>Number of persons proposed in the current year</b>	

SECONDER DETAILS

<b>Seconder Signature (NAMS Fellow)</b>	
<b>Name (in Block letter)</b>	
<b>Mailing Address</b>	
<b>Contact Number</b>	
<b>E Mail</b>	
<b>Date on which the seconder made it</b>	
<b>FAMS code number*</b>	
<b>Year of FAMS</b>	
<b>Speciality of the Seconder</b>	
<b>Number of persons seconded in the current year</b>	

\$ only 3 names can be proposed by each fellow in a year

\* The FAMS code number can be checked on NAMS Website: [www.nams-india.in](http://www.nams-india.in)



**APPLICATION FORM FOR FELLOWSHIP OF NAMS -( FAMS)DIRECT  
CATEGORY**

**Statement about the Applicant is to be written by the Proposer (not to exceed 300 words)**

**While writing about the Applicant, the proposer of the Applicant must also mention the Applicant's primary research field, other research areas and any other significant scientific contribution.**