

**AOMSI TRAVELLING FELLOWSHIP PLAN -2005 – INDIA**  
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Application are invited from members of the AOMSI for award of scholarship

Age limed 35 years

Nomination : For two posts

Duration: Two months

Amount : Rs. 20,000/- per candidate for the complete duration of scholarship

Selection committee:

1. President AOMSI
2. Hon. Secretary AOMSI
3. Education committee Chairman of AOMSI

**SELECTION CRITERIA**  
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1. Should have passed MDS in OMFS or equivalent examination recognized by Dental Council of India
2. Should be registered at the State Dental Council
3. Should be a member of AOMSI
4. Should have at least 2 years experience of working as an Oral surgeon in an institution after passing
5. Should have minimum 2 paper publications in Indian journal of Oral & Maxillofacial Surgery
6. Recommendation letter should be obtained from Head of the Department from where candidate has obtained his MDS and from the Institution he is working\
7. Application in the prescribed format to be sent to AOMSI secretary by 31<sup>st</sup> March so that the fellowship is awarded to the deserving candidate during Mid Term Conference
8. The candidate will have to complete the fellowship within 9 months or 31<sup>st</sup> March of the next year (whichever is earlier) from the date he is awarded the fellowship
9. The candidate will have to submit report of completion with one month from the date of completion
10. The fellowship Certificate and the emoluments will be remunerated after the submission of report
11. Application form to be printed in the journal of AOMSI and should also be available in AOMSI website.

**FORMAT OF APPLICATION**

<p>RECENT PASSPORT SIZE PHOTOGRAPH DULY SIGNED TOBE PASTED</p>
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1. Name of the Fellowship:
2. Name of the candidate Sh./Smt./Kum. (In Block letters)
3. Full mailing address with Pin Code and
4. Telephone Number
5. Full name of Father/Mother/Guardian
6. Sex :        Male/Female
7. Marital Status :
8. Nationality
9. Date of birth and State to which the candidate belongs:
10. Academic record starting from High School/Higher Secondary (Attested copies of Certificates to be attached)

Name of the University / Board / Institute	Examinations (s)	Date of passing	Division / class with position, if any	Maximum marks and marks secured for the entire degree	Percentage of marks obtained and position if any, (No rounding off)	Subjects taken

In case no division/class is awarded any only grading is done, exact percentage of marks and Conversion formula adopted may be mentioned.

11. Details of (May attached as appendix)

I. Professional/Practical Training :

II. Research Experience :

III. Papers Published :

IV. Previous Employment (Period, Designation, Employer) :

12. Nature of present employment with the name and date of appointment/designation and the name and address of employer.

13. Have you been abroad for academic purpose? If so give full particulars

14. Name and address of three persons who are familiar with your work (Two of them who taught you in an area of study relevant to course and the third may be your employer or a person with whom you have worked professionally) :

15. Why do you want to undertake this fellowship (in 200 words in separate sheet)

#### **ENCLOSURES TO BE ATTACHED (DULY ATTESTED)**

a) Proof of age

b) Educational Qualifications

c) Letter of invitation from centre offering you training

d) College Transcript

e) No Objection Certificate from Employer (in case of employed persons)

f) Recommendation letters from the Head

g) Proof of minimum 2 paper publications in any national/international journal

#### **16. DECLARATION**

I certify that the above information is correct and complete to the best of my knowledge and nothing has been concealed/distorted. I understand that if at any time I am found to have concealed/distorted any material information, my selection shall be liable to summary termination without notice and compensation.

**Signature of the Candidate**

Place :

Date :