Association for Medical Updates

# [www.amuindia.org](http://www.amuindia.org/)

**PART A: AWARD NOMINATION FORM**

I would like to propose/nominate (self-nomination is also acceptable)

Name :………………………………………………………

DateofBirth : …………………………… AMU MembershipNo……………………….

Designation :………………………………………………………………………

Address:

Email MobileNo:

For AMUCON - 2025 Awards

# Dr. HAR KISHAN BEDI SENIOR SCIENTISTAWARD   ( )

1. **MID-CAREERSCIENTISTAWARD** ( )
2. **UTKRISHT SEVA SAMMAN AWARD** ( )
3. **DR. NUTAN BEDI MEMORIAL AWARD** ( )
4. **AMU STAR AWARD** ( )

(whichever is applicable).

# Proposer

AMU Membership No…………………………..

Name:

Address:

Email: . MobileNo: .

Signature/date: …………………………………………………………..

# Notes: 1. The proposer and Nominee for award should be life member ofAMU.

**2. for free membership visithttp://www.amuindia.org/membershi**

**PART B: Biographic Sketch of the Nominee**

(Please print or write in capital letters only)

1. Name:
2. Designation:
3. Date ofbirth:
4. Nationality:
5. Membership no ofAMU:

6. Official address (with telephone, fax & email):---------------------------------------------------------

7. Residential address (with telephone &email):-----------------------------------------------------------

1. Educationalqualifications:
2. Professional experience (in chronologicalorder):
3. Papers published/accepted in scientific journals(indexed)

a) As First /Corresponding author ………………………………………….

b) As Co-author……………………………………………………………………………

(Kindly include list of publications with citations)

1. Chapters in books by International/Nationalpublishers

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1. Author of book published by International/Nationalpublishers

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1. Editor of book published by International/Nationalpublishers

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1. Editorial board member of scientific/otherjournals

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15 Details of Prizes, Medals, Scholarships, fellowships & National/ International Awards etc

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16. Self-evaluation of your work, particularly its strengths in different fields of activity including patient-care, teaching research and administrative experience (Up to 200 words)

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# (Signature of Nominee (Name and designation)

**Dated:**

**Send the duly filled form along with datasheet and all other documents as attachment to:email:** [**amuindiasecretariat@gmail.com**](mailto:amuindiasecretariat@gmail.com)

**and cc to : apuragr2@gmail.com**