NOMINATIONFORM

# (Dr.Malti sathe/Dr.J.B.ChatterjeaOration/Dr.J.G.Parekh)

# (ForISHBT AnnualConference2024)

**(To reach Prof. T.K.Dolai, Gen Secretary, ISHBT by 1stSeptember2024)**

(Pleasereadtheeligibilitycriteria(seebelow)beforeapplying)

NameoftheNominee: \_ DateofBirth: AddressotheNominee:

 PINcode ContactNo: Phone: Mobile E-mail: Life MembershipNumber:

 -Proposershould nominatethe nominee(notmorethan500 words):(**A separate pagecanbe attached**)

**Enclose complete up-to-date CV ofthenominee *(INTRIPLICATEhard copy& aC.D/pendrive)***

Followingheadings**mustbe**included intheCV

1. ProfessionalQualifications/Positionsheld

# ContributiontoISHBT:

1. **Researchcontribution**

# Publications. (Onlyindexedpublicationslistcanbeenclosed)

 -Name oftheProposer: Address: \_

ContactNo: Phone® Mobile

SignatureoftheProposer: Date:

Name oftheSeconder: Address: \_

ContactNo: Phone® Mobile

SignatureoftheSeconder: Date:

**INSTRUCTIONS:Nominateforoneonly(Encircleonlyoneontheheadlineclearly).**

**ELIGIBILITYCRITERIA:**

* Minimum15yearsafter post-graduationexperience.
* Shouldbeamemberofthesocietyfor atleast10years.
* Shouldhavesignificantlycontributed tothesocietyinformofScientificororganizationalwork.

**NOTE:**

* SendthehardcopytotheSecretaryonthis address-
* Prof Dr Tuphan Kanti Dolai

Indian Society of Haematology and Blood Transfusion

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Adarsha Nagar, Kolkata, West Bengal 700107

* For sending soft copy,email the form to ishbtmail@gmail.com