



Indian Academy of Pediatrics Chapter of Neuro Developmental Pediatrics

Application Form for Institutes to Affiliate as Training & Teaching Centers for IAP Fellowship Program in Developmental and Behavioral Pediatrics 2019

1. Name of the Institute _____
2. Address _____
3. Name of the Contact person and Details who will coordinate for IAP Fellowship Program from the Institute / Centre

4. Year of Establishment of the Child Development Center / Institute/ Hospital

5. Institute Registration Number: _____
6. Faculty Details: {Please see the information Below}

S. No	NAME	QUALIFICATION	EXPERIENCE	Central IAP No.

7. Research Programs if available _____
8. Training Programs Running at the Centre _____

9. Payment Details:

DD No:

Date:

Name of Bank:

DECLARATION

On behalf the Institute, I express my concern to start the **IAP Fellowship Training Program in Developmental and Behavioral Pediatrics** in line with rules and regulations set by Indian Academy of Pediatrics and its Chapter of Neuro Developmental Pediatrics. The details furnished are correct to the best of my knowledge and I agree to permit the inspection of our Institute by the Fellowship Governing Body- Inspection Committee.

Institute Head / Director / Fellowship Program Coordinator_____

Seal:_____

Place / Date:_____

Instructions:

1. Application Fee: Rs 10,000 / - (Non refundable)
2. The Application fee should be paid by Demand Draft in Favor of “**IAP Chapter of Neuro Developmental Pediatrics**” payable at Ernakulum.
3. Only those applications which are submitted with application fees will be acceptable.
4. The application is to be addressed and sent to the address of **Dr. Jeelson Unni** as mentioned below.
5. Shortlisted Institutes will be physically inspected by the Inspection Committee.
6. Travel and Lodging arrangement of the Inspection Committee will be made by the applicant institute.
7. Last date to submit application is **30th April 2019**
8. Please read the Eligibility Criteria before filling the Application Form

Address for Correspondence:

Dr. Jeelson Unni

Chairperson, IAP Chapter NDP

Co – Chairperson, Accreditation Committee

Fellowship Governing Council

50 / 1459, Cheeran House, Vidyanagar,

Kochi, Ernakulum – 6820111

9847245207 jeelson1955@gmail.com

For further queries contact:

Dr Chhaya Sambharya Prasad

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