



CUTIS Academy of Cutaneous sciences
APPLICATION FOR FELLOWSHIP PROGRAMME FOR THE YEAR
Aug 2018 BATCH

[PLEASE FILL UP THE FORM WITH CAPITAL LETTERS]

Name					
Address				Telephone Number	
				E-mail id	
Date of birth		Sex		Marital Status	
Blood group				Nationality	
Applied for	Dermatosurgery <input type="checkbox"/> Aesthetic dermatology <input type="checkbox"/> Pediatric Dermatology <input type="checkbox"/>				
Qualification		Year of passing	University	Marks	Percentage
	MBBS				
	MD/DIPLOMA				
	Additional				
Experience after PG Degree					

DECLARATION

I Dr. _____ declare that the information furnished above is correct to the best of my knowledge and belief and also declare that this is only one fellowship course I applied and not done any fellowship course from RGUHS earlier.

Place:

Date:

Signature of candidate

Check List:

1. SSLC marks card (Copy)
2. Degree certificate (MBBS,MD,Diploma)
3. KMC Registration Certificate (Copy) for both MBBS and MD
4. Marks cards MBBS,MD (Copy)
5. Experience Certificate (Copy)
6. Updated CV
7. Demand draft for Rs. 5,000/- in Favor of CUTIS, Bangalore.
8. In service candidate can apply through proper channel

Note:

1. Bring all originals on the day of interview and enclose **2 (Two)** set of attested Xerox Copies duly filled with this application.