INDIAN SOCIETY FOR VETERINARY SURGERY (ISVS)

Nomination Form for the Fellow of ISVS - Field Vet Clinician (FCISVS)

The undersigned fellows of the Indian Society for Veterinary Surgery, respectively propose and second the herein named candidate for election as a Fellow of the society

Name of the applicant:	
Designation:	
Address:	
Mobile No.:	
E-mail:	

Speciality (Discipline/ Sub-discipline): **VETERINARY SURGERY AND RADIOLOGY**

Proposer (Name in Block Letters)	Seconder (Name in Block Letters)
Address	Address
Mobile No.:	Mobile No.:
E-mail:	E-mail:
Signature:	Signature:
Date:	Date:

(To be filled in by the office of the Executive Secretary, ISVS)

S. No. of the applicant: ……

Date of receipt of the proposal: ……

EXECUTIVE SECRETARY

Brief Bio-data of the applicant (Summary of achievement): Not more than one page

	Name and Signature of the applicant
Signature of the Proposer	Signature of the Seconder

Name of the Proposer	Name of the Seconder