NATIONAL NEONATOLOGY FORUM

ADDRESS FOR COMMUNICATION: Secretary, NNF
803, 8th Floor, A-9, North-ex Tower, Netaji Subhash Place, Pitampura,
New Delhi - 110034 Tel: 011-27353535,
Email: secnnf@nnfi.org, Website: www.nnfi.org
Society Registration No. - S/12637/1982,
Registration of Society Act XXI of 1860

NOMINATION FORM FOR AWARD OF FELLOWSHIP (FNNF)

RULES FOR NOMINATION OF REGULAR CANDIDATES:

1. The National Neonatology Forum (NNF) confers Fellowship (FNNF) to the members of the NNF who have made outstanding contributions in the fields of Neonatology, Research & Development of Sub-specialties, Medical Publications and Community Neonatology over and above the call of normal duty or due to position of the nominee.

2. The nomination should be submitted in the prescribed form duly proposed and seconded by the eligible Fellows and/or Life Members of the NNF to be submitted in 7 (Seven) copies.

3. The nominee should have been a member of the National Neonatology Forum for 10 completed years before submission of his/her nomination to the National Neonatology Forum.

4. The eligible Fellow and/or Life member of the NNF is entitled to nominate only one nominee for FNNF in a year & if they nominate more than one nominee then their nomination will get cancelled.

5. The proposer and the seconder of the nomination should have been the member of the National Neonatology Forum for 10 years before proposing / seconding the name of any member for the FNNF.

6. A duly signed consent of the nominee stating that he/she is willing to be nominated to Fellowship of the National Neonatology Forum should be given.

7. The nominations will be invited through an announcement in NNF’s official website (www.nnfi.org) and publications or in any other form like circular etc.

The nomination should be submitted by 15th September 2019 to Secretary NNF, 803, North-ex Tower, A-9, Netaji Subhash Place, Ring Road, Pitampura, Delhi -110034

RULES FOR NOMINATION OF NON-REGULAR CANDIDATES (HONORARY FELLOWSHIP OF NNF)

1. Honorary Fellowship of NNF is conferred to scientists who are not the members of NNF but have made outstanding contributions to improve the status of neonatology and newborn health in India.

2. The nomination should be submitted in the prescribed form duly proposed by the eligible Fellow and/or Life member of NNF.

3. The eligible Fellow and/or Life member of NNF is entitled to nominate only one nominee for fellowship in a year.

4. A duly signed consent of the nominee stating that he/she is willing to be nominated to fellowship of the National Neonatology Forum should be given.

5. The nominations will be invited through an announcement in NNF’s official website (www.nnfi.org) and publications or in any other form like circular etc.

The nomination should be submitted by 15th September 2019 to Secretary NNF, 803, North-ex Tower, A-9, Netaji Subhash Place, Ring Road, Pitampura, Delhi -110034

For details and Nomination Form please go through our website: www.nnfi.org
NATIONAL NEONATOLOGY FORUM
Address for communication: Secretary, NNF
803, 8th Floor, A-9, Northex Tower, Netaji Subhash Place, Pitampura,
New Delhi - 110034 Tel: 011-27353535,
Email: secnnf@nnfi.org, Website: www.nnfi.org
Society Registration No. - S/12637/1982,
Registration of Society Act XXI of 1860

NOMINATION FORM FOR AWARD OF FELLOWSHIP (FNNF)-2019

Name of the Nominee: .............................................. Membership No.: ......................
Date of Birth: .............................................. Sex: ......................................................
Communication Address: ..............................................................
Mobile No.: ...................... Email: ..............................................................

Date of Obtaining Degree/Diploma:-

<table>
<thead>
<tr>
<th>Medical / Pediatric Qualification</th>
<th>Name of the University</th>
<th>Qualifying Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Teaching and/or Professional Experience till date:-

<table>
<thead>
<tr>
<th>Sr. no</th>
<th>Designation</th>
<th>Hospital</th>
<th>Period (From – To)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Editorial Services provided to Medical Journal (Yes / No, if yes, then please specify)
   (i) Name of the Medical Journal
   (ii) Details of Medical Journal
       (a) Frequency – Monthly / Bimonthly / Quarterly / Yearly
       (b) Approximate circulation: copies
       (c) Indexed in Cumulative Medical Index: Yes / No
   (iii) Designed in Journal with years of service provided
   (iv) Exact job specification / role in the journal
3. **Details of Publications (Kindly attach an annexure if required)**

(i) Number of Medical Books published with their titles, publishers and year of publication (please specify whether single or multiple editors, mono or multiple authors, proceedings of workshop / conference / symposia, approximate copies consumed / sold and whether receiving royalty / honorary work).

(ii) Contribution to Chapters to Books.

(iii) Publications in Medical Journals (attach a list of complete references of publications — please do not include articles submitted for publication).

   (a) International Medical Journals

   (b) National Medical Journals

(iv) Publications in other Print Media (Child Health related articles in newspapers, magazines, school books, etc. Details of title, magazine and date/year of publication, etc to be provided).

4. **Awards of Professional Recognition (Specify the name(s) of the Award(s) with year)**

   (i) State/City

   (ii) National

   (iii) International

5. **Representation in International / National Organizations / Committees / Bodies / Institutions (Kindly attach an annexure if required)**

   (i) Role in International Organizations (UNICEF, WHO, World Bank, UNFPA, USAID etc.)

   (ii) Membership of Expert Committees (Task Force of ICMR, Ministry of Health and Family Welfare, Ministry of Women and Child Development, Planning Commission, ICDS, Indian Council of Child Welfare, Medical Council of India, etc. — Please specify the title of the Committee and year(s) of serving).

   (iii) Visiting Professorship and other assignments beyond the purview of routine duties (Please specify the University / Assignment and year(s))

      (a) India

      (b) Abroad

6. **Role in NNF / International Neonatal / Pediatric / Perinatal Societies with year(s) of serving (Kindly attach an annexure if required)**

   (i) Member of Executive Committee of International Pediatric Association / APSSEAR

   (ii) Member of the Executive Board of Central NNF

   (iii) Office-Bearer of Central NNF

   (iv) Office-Bearer of State NNF

   (v) Contribution of National / Zonal / State Conference of NNF

      (a) Secretary

      (b) Joint Organizing Secretary

      (c) Any other contribution (Please specify)
Any other (Organization of CME Programs, Symposia, Seminars, Workshops/Chapters etc. (Please specify the designation(s) with the exact responsibilities)

Convenor / Member of NNF Committee / Task Force / Program

7. **Contribution made towards Newborn Welfare activities in your**
   **(Kindly attach an annexure if required)**

   (i) City

   (ii) State

   (iii) National/Level

8. **Give a summary of highlights of the outstanding contributions made by the nominee in the fields of Newborn & Child Health, Research, Education, Welfare activities and organizational work in about 200 words. Please include features not highlighted in sections 1 to 7. (Kindly attach an annexure if required)**

---

<table>
<thead>
<tr>
<th>Signature of Proposer</th>
<th>Signature of Seconder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Proposer</td>
<td>Name of Seconder</td>
</tr>
<tr>
<td>NNF Membership No.</td>
<td>NNF Membership No.</td>
</tr>
<tr>
<td>Date</td>
<td>Date</td>
</tr>
<tr>
<td>Place</td>
<td>Place</td>
</tr>
</tbody>
</table>

**CONSENT OF THE NOMINEE**

I am willing to be nominated to Fellowship of National Neonatology Forum.

Signature of the Nominee: .................................................................

Name of the Nominee: .................................................................

---

**NATIONAL NEONATOLOGY FORUM**

**Address for communication:** Secretary, NNF
803, 8th Floor, A-9, North-ex Tower, Netaji Subhash Place,
Pitampura,
New Delhi - 110034 Tel: 011-27353535,
Email: secnnf@nnfi.org, Website: www.nnfi.org
Society Registration No. - S/12637/1982,
Registration of Society Act XXI of 1860