



INDIAN ACADEMY OF PEDIATRICS - TAMILNADU STATE CHAPTER

DR. JAYARAJ AYYA NADAR ORATION AWARD

1. The award will be decided among the Pediatricians of IAP–TNSC after receiving nominations
2. The nominee for Dr. Jayaraj Ayya Nadar oration should have been a member of the Indian Academy of Pediatrics for 10 years before submission of his/her nomination to the IAP – TNSC. The enrolment year of the membership of the nominee shall be taken as full year of membership for the purpose of computing 10 years of membership.
3. The nomination should be submitted in the prescribed form duly proposed and seconded by the eligible fellows and / or life and / or ordinary Members of IAP-TNSC as e-copy only.
4. The eligible fellow and / or life and / or ordinary member of the IAP is entitled to nominate only one nominee in a year. The proposer and the seconder of the nominee should have been the member of the Indian Academy of Pediatrics for 10 years before proposing / seconding the name of any member for the Ayya Nadar Oration Award
5. Credit will be given to the seniority, his / her contribution to Pediatrics in general and IAP in particular, background academic work done and contribution in research/papers/ lectures/ participation in Pediatrics and related conferences. The decision of the award will be made by compiling the individual assessment of the steering committee of IAP.
6. If the committee feels uniformly against giving the award to anyone of the nominees in view of not qualifying for the award, the award will not be given for the year.
7. The duly filled form along with the signed consent of the nominee (scanned copy of the form) stating that he /she is willing to be nominated for the Dr. Jayaraj Ayya Nadar Oration Award should be sent to the below email on or before 24.07.2023

Dr. Tiroumourugane Serane. V
Hon. Secretary, IAP TNSC,
Email: iaptnscoffice@gmail.com
Mobile No: 99424 41999



INDIAN ACADEMY OF PEDIATRICS - TAMILNADU STATE CHAPTER
DR. JAYARAJ AYYA NADAR ORATION
NOMINATION FORM

Name of the Nominee

CIAP Membership No.:

Nominee's Address:

Mobile number

Email



Declaration by the Nominee

I hereby declare that I consent to this nomination for Dr. Jayaraj Ayya Nadar oration of Indian Academy of Pediatrics–Tamilnadu State Chapter. I also declare that the supportive information given for this application is true to the best of my knowledge

Nominee's Signature with date:

Name of proposer & Membership No:

Proposer's Address:

Proposer's Signature with date:

Name of Seconder & Membership No:

Seconder's Address:

Seconder's Signature with date:

Supporting Details for the Awards

Please furnish the details requested below in a separate document

1. Details of Publications:
 - i) Books published with their title, publishers and year of publication (please specify whether single or multiple editors/authors.)
 - ii) Contribution to Chapters.
 - iii) Publications in Medical Journals (attach a list of complete references of publication– please do not include articles submitted for publication).
 - iv) Publications in other Print media (Child health related articles in newspaper, magazines, school books etc. Details or title of magazine and date/year of publication, etc. to be provided).
2. Awards of Professional Recognition (Specify the names(s) of the Awards with year)
 - i) State/ City/Town
 - ii) National
 - iii) International
3. Faculty in IAP Conferences
 - i) National
 - ii) State
 - iii) Subspecialty
4. Representation in International/National Organization/ Committees/ Bodies/ Institutions.
 - i) Role in International Organization (UNICEF, WHO, etc.)
 - ii) Membership of Expert Committees (Task Force of ICMR, Ministry of Health and Family Welfare, Ministry of Women and Child Development, Planning Commission, CDS, Indian Council of Child Welfare, Medical Council of India, etc. – Please specify the title of the post held, name of the Committee and years of serving).
 - iii) Visiting professorship and other assignments beyond the purview of routine duties. (Please specify the University/ Assignment and years)
 - a) India
 - b) Abroad
 - iv) Role in IAP/International Pediatric Societies with year(s) of Serving
 - a) Office-Bearer of Central IAP
 - b) Member of the Executive Board of Central IAP
 - c) Office-Bearer of State Chapter IAP
 - d) Convener/member of IAP Committee/Task force Program
 - e) Office-Bearer in District Branch IAP
 - f) Contribution to National/Zonal/State conference of IAP
 1. Chairperson
 2. Secretary
 3. Treasurer
 4. Joint Organizing Secretary
 5. Any other contribution (please specify)
 - g) Any other (organization of CME programs, Symposia, Seminars, Workshops/Chapters, etc. (please specify the designations with the exact responsibilities)
5. Contribution made towards Child Welfare activities in your place
 - i) City/Town/Village level
 - ii) State level
 - iii) National level
6. Any other outstanding contributions, which are not highlighted above.