



INDIAN ORTHODONTIC SOCIETY

APPLICATION TO BE A HOST INSTITUTE FOR 'NATIONAL ACADEMIC EXCHANGE PROGRAM' OF THE INDIAN ORTHODONTIC SOCIETY

Name of the Institute :

Address of the Institute :

Year of starting of the Institute :

Year of starting PG in the Department of Orthodontics :

Number of PG trainees in the Department of Orthodontics :

Number of Visiting PGs & Faculty, the institute can accommodate:

Name of the HOD :

Contact details of the HOD:

Our institute would like to be part of the National Student Exchange Program of the Indian Orthodontic society. I hereby express our interest and willingness for the same.

Signature of the HOD(Orthodontics):

Signature of the Head of the Institution:

[Scan & mail the filled, signed form to secretary@iosweb.net with CC to studentscommitteeios@gmail.com] with the subject as 'APPLICATION TO BE A HOST'