INDIAN ORTHODONTIC SOCIETY

APPLICATION FOR IOS ANNUAL AWARDS 2023

NAME OF THE AWARD :

……

……

NAME OF THE APPLICANT:

…….

IOSMEMBERSHIP NO : LM/SLM……

AGE / SEX:

MAILING ADDRESS:

……

……

……

PIN …… **STATE:**……

MOBILE……

TEL. NO . WITH CODE……

E-MAIL : ……

DOCUMENTS ATTACHED :

1)

2)

3)

4)

5)

6)

I…….hereby declare that the above furnished information / testimonials attached are true to the best of my knowledge, if found untrue, I shall be liable for appropriate action by IOS

I herby declare that this work has not been submitted for any other category of award nor has been awarded any other award.

STAMP SIZE
PHOTOGRAPH
OF THE
APPLICANT

NAME AND SIGNATURE
OF THE APPLICANT WITH DATE

Mailing address:

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