

APPLICATION FORM SHORT TERM STUDENTSHIP (STS) 2011

INDIAN COUNCIL OF MEDICAL RESEARCH

Note: *Before filling up this form, please read carefully the detailed instructions for STS 2011*

DETAILS OF THE GUIDE

(*) ==> Mandatory Fields

Full Name in Block Letters*

Designation*

Name of Department*

Name of Medical College*

Address for Correspondence*

State*

City*

Pin Code*

Mobile

Telephone
Residence STD Code Tel Ph

Office STD Code Tel Ph If,Extn

Email*

Refresh

Save and Continue(to Upload Proposal)

APPLICATION FORM SHORT TERM STUDENTSHIP (STS) 2011

INDIAN COUNCIL OF MEDICAL RESEARCH

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DETAILS OF THE PROPOSED STS-2011 PROJECT (*) ==> Mandatory Fields

1. Title*

2. Type of Study*

3. Subject Area*

4. Name of the Department (where study will be conducted) *

5. Research Proposal

Title (up to 25 words)

Introduction / Background (up to 300 words)

Objectives (up to 100 words)

Methodology (up to 800 words)

Implications / Expected Outcome (up to 100 words)

References (Up to 100)

ENCLOSURES/ ATTACHMENTS (attach as PDF files)

Filled in Scanned Attestation Form duly forwarded by Guide, Head of Department, Principal

1. ATTESTATION FORM (Compulsory) *

2. Ethics Committee Approval (IEC or IAEC) *

 Yes No

3. Informed Consent Form *

 Yes No

4. Case Study Form *

 Yes No

5. Study Questionnaire *

 Yes No