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| VIF Logo New_PNG.pngGSTIN: 33AABTV9686L1ZNWebsite: www.venusinfo.org E–mail: contact@venusinfo.orgPhone: 044 – 22531502 Mobile: +91 9840556456No.1, Ganesh Nagar Main Road, Adambakkam, Chennai – 600088, Tamilnadu, India |

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| Official Nomination Form for 7th Venus International Healthcare Awards – VIHA 2024 |
| 20 July 2024 at Green Park Chennai, India | https://venusinfo.org/medical/2024/ahs.html |
| **Section – I Specialty (Refer clause 4 and 6 of the Policy Document)** |
| * 1. Specialty
 |  |
| * 1. Research Focus
 |  |
| * 1. Award Category
 |  |
| **Section – II Personal Information** |
| * 1. Name of the Applicant
 |   |
| * 1. Gender
 |  |
| * 1. Date of Birth and Age
 |  |
| * 1. Place and Country of Birth
 |  |
| * 1. Nationality and Citizenship
 |  |
| * 1. Marital Status
 |  |
| * 1. Primary Email Address
 |  |
| * 1. Secondary Email Address
 |  |
| * 1. Mobile Number
 |  |
| 2.10 Education Qualification  |  |
| 2.11 Years of Experience |  |
| **Section – III Current Employment / Occupation** |
| * 1. Name of the Hospital/Institution
 |  |
| * 1. Postal Address of the Hospital/Institution
 |  |
| * 1. Website of the Hospital/Institution
 |  |
| * 1. Date of Joining in Hospital/Institution
 |  |
| 3.5 Department / Division |  |
| 3.6 Present Designation |  |
| 3.7 Nature of Appointment (Permanent/Contract) |  |
| **Section – IV: List your professional accomplishments (100 – 150 words)**

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Declaration

I hereby declare that I have carefully read theclause 10 (award processing steps) in the Policy Document of VIHA 2024 and agreed to the same.

I confirm that to the best of my knowledge, the information given in this application is correct and complete.

At any time I am found to have concealed/distorted any material, information, my nomination shall be liable to be summarily terminated without notice/compensation.

I agree to VIF to process the data submitted in this application form, or any other data that the foundation may obtain from me for any purposes connected with VIHA or AHS 2024 or for any other legitimate reason.

Date: Place: Scanned Signature of Applicant

**Annexure – I**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| * **A. Submission:** List of documents to be submitted
1. The filled nomination form in PDF/.Doc/.Docx format
2. Duly completed curriculum vitae (of any template /pages) in PDF format
3. Passport size photograph (JPEG/PNG format)
4. Copy of degree certificates (PG or PhD) in PDF/JPEG format
5. Copy of registration certificate (s)/ license (s) if applicable
6. Copy of workplace ID (PDF/JPEG format)

Submit the filled application (along with the necessary documents) electronically to: viha2024@venusinfo.org (AND) directorvifindia@gmail.comNote: The VIHA 2024 no longer requires a hardcopy of the application* **B. Basic Information on Event**

|  |  |
| --- | --- |
| Event Frequency | Annual |
| Event Code | HS24EN07SN–040 |
| Event Type | Conference |
| Conference Title | 7th Annual Healthcare Summit |
| Conference Acronym | AHS 2024 |
| Conference Website | https://venusinfo.org/medical/2024/ahs.html |
| Conference Location | Green Park Hotel |
| Conference City | Chennai |
| State | Tamilnadu |
| Country | India |
| Conference Date | 20 July 2024 |
| Conference ISBN Number | (under process) |
| Publisher Name | Venus International Foundation |

* **C. The Secretariat**

The General Chair – 7th Annual Healthcare Summit (AHS 2024), Center for Health and Medical Sciences,Venus International Foundation, No.1, Ganesh Nagar Main Road, Adambakkam, Chennai – 600088, Tamilnadu, India. Ph: 044 – 22531502* **D. The Committee**

Dr. R. Sathishkumar: General Chair (chairman@venusinfo.org)Mrs. M. S. Sudha: Program Chair (+91 9840556456 | director@venusinfo.org)Dr. T. R. Ganeshbabu: Publications Chair (contact@venusinfo.org) |

**Annexure – II**

This section describes VIHA 2024 Selection Process (Clause 10 of the Policy Document)

|  |  |
| --- | --- |
| Step – 1 | Received Nomination documents will be sent for screening process  |
| Step – 2 | Acknowledgement intimation will be communicated to the Nominee |
| Step – 3 | VIHA team may ask the proof for the credits mentioned in the CV (Optional) |
| Step – 4 | Cross verifying the documents and forwarding it to the Committee |
| Step – 5 | Selected nominees will be communicated with an Official Email |
| Step – 6 | AHS 2024 Registration (Refer Annexure – B of the Policy Document) |
| Step – 7 | Release of the winners list in the Official webpage |
| Step – 8 | An Official Email will be communicated to the Award Winner |
| Step – 9 | Award Presentation Ceremony |
| Step – 10 | Summary of the AHS 2024 will be floated in Official webpage |