

# FHNO Institutional Fellowship Application Form - 2022

This is the form the candidate needs to fill out to apply for FHNO Institutional Fellowship Batch 2022. We understand that you have gone thru all details regarding the rules and regulations of the fellowship before filling out the form and you agree to that. You can go to the website for details (<https://fhnofellowship.org/index.html>, <https://fhnofellowship.org/fhno-requirement-eligibility-for-candidate.html>, <https://fhnofellowship.org/fhno-selection-process-candidate.html>) or mail to [fhnofellowship@gmail.com](mailto:fhnofellowship@gmail.com) in case of any query. We understand that all the details provided in the form are true and you will be able to produce proof of the same if asked for. The fees submitted are non-refundable. The FHNO Institutional Fellowship committee reserves all rights.

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**\* Required**

1. Email \*

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2. Path Chosen \*

please refer "<https://fhnofellowship.org/fhno-selection-process-candidate.html>" in case you want to know more about path system

*Mark only one oval.*

Path A

Path B     *Skip to question 4*

Path A Institutes

3. Name of the institute in case Path A is chosen \*

Please choose your institute

*Mark only one oval.*

Apollo-CBCC Cancer Center, Ahmedabad

ASTER Malabar Institute Of Medical Sciences, Calicut

Balco medical centre (vedanta medical research foundation), Raipur

- Dr. B.L KAPUR MEMORIAL HOSPITAL, Delhi
- CIMS Hospital Pvt Ltd, Ahmedabad
- HCG Cancer Center, Ahmedabad
- HCG Cancer Center, Vadodara
- HCG Manavata cancer centre, Nashik
- Kailash Cancer Hospital & Research Centre, Muni Seva Ashram, Goral
- Karnataka Cancer Therapy & Research Institute, Hubli
- Kasturba Medical College and Hospital, Manipal
- Kokilaben dhirubhai ambani hospital & medical research institute, Mumbai
- Kovai Medical Center & Hospital
- Mahatma Gandhi Cancer Hospital, Miraj
- MALABAR CANCER CENTRE, Kannur, Kerala
- Max superspeciality hospital, Delhi
- Mazumdar Shaw Medical Centre, Bangalore
- MEDANTA - THE MEDICITY, Gurugram
- Medica Superspeciality Hospital, Kolkata
- MVR Cancer Centre & Research Institute, Calicut, Kerala
- Nadkarni's 21st Century Hospital, Vapi, Gujarat
- National Center Institute, Nagpur
- Neeti Clinics, Nagpur
- NM Virani Wockhardt Hospital, Rajkot
- Paras Cancer Centre, Patna
- Patel Hopspital, Jalandhar
- Rajiv Gandhi Cancer Institute & Research Centre, Delhi
- Shanku Hospitals, Mahesana, Gujarat
- Shree Krishna Hospital, Karamsad, Gujarat
- Sir HN Reliance Foundation Hospital, Mumbai
- SRJ CBCC Cancer Hospital, Indore
- Vedant Hospital, Thane
- VPS Lakeshore Hospital & Research Centre, Kerala
- Zydus Cancer Center, Ahmedabad

## Individual Details

4. Your name \*

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5. Mobile number \*

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6. Permanent Address \*

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7. Date of birth \*

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*Example: January 7, 2019*

## Current Work & Employment Status

8. Current Employment status \*

*Mark only one oval.*

- Self employed / Private Practitioner    *Skip to question 14*
- Perusing Education / training (Observership, fellowship, etc)
- Working in Academic Institute
- Not working    *Skip to question 14*

## Details of Current Work & Employment Status

9. Current Employment status - Name of Post \*

Please write your designation, Department and Institute of work, Time since joined same (Month and Year)

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10. Current Employment status - Date since \*

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*Example: January 7, 2019*

11. Name of your current Employer / Head of Department / Mentor \*

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12. Contact number of your current Employer / Head of Department / Mentor \*

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13. email address of your current Employer / Head of Department / Mentor \*

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## Education Qualification

## 14. Highest Primary Degree \*

*Mark only one oval.*

- MS/DNB General Surgery
- MS/DNB/Diploma ENT
- MCh (HN Oncology / Plastic / Surgical Oncology)
- MDS

## 15. Month of Passing the mentioned Degree \*

*Mark only one oval.*

- January
- February
- March
- April
- May
- June
- July
- August
- September
- October
- November
- December

## 16. Year of Passing the Mentioned Degree \*

Number in 4 digit (ie. 2019)

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## 17. Institute and University awarding the mentioned Degree \*

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Post PG Experience in  
HN/Oral Oncology

This section is about your post PG experience in HN/Oral Surgical oncology. It is one of the field which will carry marks.

## 18. Name of the first center \*

Write Name of Center, City, State

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## 19. Does Institute is Partner institute of FHNO Institutional Fellowship \*

You can find list of FHNO Institutional Fellowship Partner Institutes on <https://fhnofellowship.org/list-of-centers.htn>

*Mark only one oval.*

Yes

No

## 20. Does the department where you worked run one of these courses? - MCh (Surgical Oncology / HN Surgical Oncology) / DNB (Surgical Oncology / HN Surgical Oncology) \*

*Mark only one oval.*

yes

No

## 21. Name of Primary Mentor \*

Write full name with highest degree

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22. From date \*

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*Example: January 7, 2019*

23. To date \*

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*Example: January 7, 2019*

24. Experience at more than one institute? \*

*Mark only one oval.*

Yes

No *Skip to question 48*

Post PG Experience in  
HN/Oral Oncology (2)

This section is about your post PG experience in HN/Oral Surgical oncology. It is one of the field which will carry marks.

25. Name of the second center \*

Write Name of Center, City, State

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26. Does Institute is Partner institute of FHNO Institutional Fellowship \*

You can find list of FHNO Institutional Fellowship Partner Institutes on <https://fhnofellowship.org/list-of-centers.htm>

*Mark only one oval.*

Yes

No

27. Does the department where you worked run one of these courses? - MCh (Surgical Oncology / HN Surgical Oncology) / DNB (Surgical Oncology / HN Surgical Oncology) \*

*Mark only one oval.*

yes

No

28. Name of Primary Mentor \*

Write full name with highest degree

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29. From date \*

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*Example: January 7, 2019*

30. To date \*

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*Example: January 7, 2019*

31. Experience at more than two institutes? \*

*Mark only one oval.*

Yes

No *Skip to question 48*

Post PG Experience in  
HN/Oral Oncology (3)

This section is about your post PG experience in HN/Oral Surgical oncology. It is one of the field which will carry marks.



32. Name of the third center \*

Write Name of Center, City, State

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33. Does Institute is Partner institute of FHNO Institutional Fellowship \*

You can find list of FHNO Institutional Fellowship Partner Institutes on <https://fhnofellowship.org/list-of-centers.htm>

*Mark only one oval.*

Yes

No

34. Does the department where you worked run one of these courses? - MCh (Surgical Oncology / HN Surgical Oncology) / DNB (Surgical Oncology / HN Surgical Oncology) \*

*Mark only one oval.*

yes

No

35. Name of Primary Mentor \*

Write full name with highest degree

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36. From date \*

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*Example: January 7, 2019*

37. To date \*

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*Example: January 7, 2019*

38. Experience at more than three institutes? \*

*Mark only one oval.*

Yes

No *Skip to question 48*

Post PG Experience in  
HN/Oral Oncology (4)

This section is about your post PG experience in HN/Oral Surgical oncology. It is one of the field which will carry marks.

39. Name of the fourth center \*

Write Name of Center, City, State

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40. Does Institute is Partner institute of FHNO Institutional Fellowship \*

You can find list of FHNO Institutional Fellowship Partner Institutes on <https://fhnofellowship.org/list-of-centers.htm>

*Mark only one oval.*

Yes

No

41. Does the department where you worked run one of these courses? - MCh (Surgical Oncology / HN Surgical Oncology) / DNB (Surgical Oncology / HN Surgical Oncology) \*

*Mark only one oval.*

yes

No

42. Name of Primary Mentor \*

Write full name with highest degree

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43. From date \*

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*Example: January 7, 2019*

44. To date \*

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*Example: January 7, 2019*

45. Experience at more than four institutes? \*

*Mark only one oval.*

Yes

No

#### Previous fellowship application attempts

46. Any previous attempts for FHNO fellowship? \*

please provide relevant detail for unsuccessful previous attempts of applications

*Mark only one oval.*

yes, FHNO Institutional fellowship

yes, other FHNO fellowships

No

47. Please describe why the previous attempt was unsuccessful \*

please explain in detail the reason in detail. Please write "NA" if not applicable

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### Publications

This section is about Journal Publications. Only publications where you can submit full text / online links will be considered.

48. Have you done publications? \*

*Mark only one oval.*

Yes

No *Skip to question 58*

### Publications in PubMed Indexed Journal

Please write details about your Publications. Please write publications which are PubMed indexed only.

49. Publications in PubMed Indexed Journal \*

*Mark only one oval.*

yes

no *Skip to question 54*

### Details of Publications in PubMed Indexed Journals

50. Do you have any "case report / Technique" published in a PubMed Indexed journal \*

Mark only one oval.

Yes

No

51. Description of "Case Report / Technique" published in PubMed Indexed Journal (write NA none) \*

You can write more than one. write them with full citations (eg. "1. XYZ et al..., 2. ABC et al....)

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52. Do you have any publications other than "case report / Technique" published in PubMed Indexed journal \*

Mark only one oval.

Yes

No

53. Description of Publication other than "Case Report / Technique" published in PubMed Indexed Journal (write NA if none) \*

You can write more than one. write them with full citations (eg. "1. XYZ et al..., 2. ABC et al....)

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## Details of Publications in Non-PubMed Indexed Journals

Please mention all eligible non-PubMed indexed publications

54. Do you have any "case report / Technique" published in an Non-PubMed Indexed journal \*

*Mark only one oval.*

Yes

No

55. Description of "Case Report / Technique" published in Non-PubMed Indexed Journal (write NA if none) \*

You can write more than one. write them with full citations (eg. "1. XYZ et al..., 2. ABC et al....")

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56. Do you have any publications other than "case report / Technique" published in a Non-PubMed Indexed journal \*

*Mark only one oval.*

Yes

No

57. Description of Publication other than "Case Report / Technique" published in Non-PubMed Indexed Journal (write NA if none) \*

You can write more than one. write them with full citations (eg. "1. XYZ et al..., 2. ABC et al....)

Four horizontal lines for writing the publication description.

**Presentations**

Please only mention presentations for which you can provide a certificate. Presentation without certificate will not be counted.

58. Have you done any presentations at conferences? \*

*Mark only one oval.*

yes

No *Skip to question 63*

**Description of Presentation**

59. Podium Presentation at the Regional / National Conference? (write NA in none) \*

Write Index, title of the presentation, Name of the conference, Date of Presentation.

Five horizontal lines for writing the presentation description.

60. Podium Presentation at International Conference? (write NA in none) \*

Write Index, title of the presentation, Name of the conference, Date of Presentation.

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61. Poster Presentation at the Regional / National Conference? (write NA in none) \*

Write Index, title of the presentation, Name of the conference, Date of Presentation.

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62. Poster Presentation at International Conference? (write NA in none) \*

Write Index, title of the presentation, Name of the conference, Date of Presentation.

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**Award  
Section**

Please only mention awards for which you can provide a certificate. Award without certificate will not be counted.



63. Have you received an award at a conference / other places? \*

Award can be a best poster / best paper / Quiz / Academic awards / Medals

Mark only one oval.

Yes

No

64. Please describe your award (write NA if none) \*

Write your award / awards (Index, Name of award, Description, year)

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### Post Graduate Thesis

65. Write title of your PG Thesis with brief description of the project \*

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### Personal Statement

66. Personal statement indicating the purpose of requesting fellowship and how that will help you in your career growth \*

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### Attachments

This section is about separate attachments you need to provide with your application (as mail attachment to [fhnofellowship@gmail.com](mailto:fhnofellowship@gmail.com) )

67. Have you provided your CV \*

Please provide brief CV with details pertinent to the fellowship

*Check all that apply.*

Yes

68. Have you provided soft copies of your degree certificate ? \*

Please provide soft copy PDF of your highest educational degree

*Check all that apply.*

Yes

69. Have you provided soft copies of your experience certificates? \*

Please provide certificates for all experience you have quoted in the form

*Check all that apply.*

yes

## 70. Have you provided your log of work \*

Please provide detailed log of work Oncology you have performed during your experiences

*Check all that apply.*

Yes

## 71. Have you provided soft copies supporting your publications/presentations / Awards if declared in relevant fields in the form \*

Please attach them with a separate mail to [fhnofellowship@gmail.com](mailto:fhnofellowship@gmail.com)

*Check all that apply.*

Yes

## 72. Have your provided letter of recommendation \*

Please attach them with a separate mail to [fhnofellowship@gmail.com](mailto:fhnofellowship@gmail.com)

*Check all that apply.*

Yes

## 73. Have you provided a copy of the transfer of application fees? \*

Account name: FOUNDATION FOR HEAD AND NECK ONCOLOGY, Kotak Mahindra Bank, B T M layout, Bangalore bran  
Account no- 3014092405. IFSC :KKBK0008077. Please also CC send transaction details to Dr. Gouri Pantvaidya,  
Treasurer FHNO at [docgouri@gmail.com](mailto:docgouri@gmail.com) and [fhno.office@gmail.com](mailto:fhno.office@gmail.com).

*Check all that apply.*

Yes

#### 74. Declaration \*

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it. I hereby authorize FHNO for sharing/ verification of the information furnished on this form. I have read all the terms and conditions regarding FHNO Head and Neck fellowship, and I agree to them. FHNO has all rights to decide the outcome of the application which shall be final and abiding.

*Check all that apply.*

yes

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